

# Montgomery County Senior Real Estate Property Tax Relief Program

The application completed in its entirety and required documents are due by June 30th.

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Date of Application: \_\_\_\_\_

Owner of Record \_\_\_\_\_ As recorded  
in the Recorder of Deeds' office.

Parcel Number \_\_\_\_\_ Can be found on real estate property tax bill and/or receipt.

Property address \_\_\_\_\_

## APPLICANT INFORMATION

Applicant Name(s) \_\_\_\_\_ ; \_\_\_\_\_

Date of Birth \_\_\_\_\_ ; \_\_\_\_\_

Ownership Type ☐ Individual/Joint ☐ Other Entity If Other Entity selected, attach trust agreement, operation agreement, etc.

☐ Yes ☐ No Were all applicants 62 or older during or before the application year?

☐ Yes ☐ No Does the applicant occupy the property as their primary residence?

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Cellular Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

## PROPERTY INFORMATION

☐ Yes ☐ No Does the parcel include more than your Homestead?  
A Homestead is the real estate property occupied by Eligible Taxpayer as their primary Residence.

☐ Yes ☐ No Does the parcel include more than one structure that serves as a dwelling unit?

☐ Yes ☐ No Have any improvements or additions been made to the property in the past year?

☐ Yes ☐ No Is the current homestead assessment under appeal?

☐ Yes ☐ No Are real property taxes on this property paid via escrow with your mortgage payment?

☐ Yes ☐ No Are the taxes on this property paid through the current tax year?

## REQUIRED DOCUMENTS

Please attach copies of the required documents to this application.

☐ **Proof of Identity and Age**

Include one of the following:  
Government-Issued Identification,  
such as, Driver's License, Birth  
Certificate, Passport, etc.

☐ **Proof of Missouri Residency**

Include one of the following:  
Driver's License, Voter Registration  
Card, state-issued nondriver  
identification, etc.

☐ **Proof of Ownership**

Deed Book \_\_\_\_\_ Page \_\_\_\_\_

Or include a copy of deed identifying  
Applicant as an owner of the  
Property, or a written instrument  
showing applicant has legal or  
equitable interest in the Property

☐ **Proof of Liability for Payment of Taxes**

Copy of the most recent full year paid property  
Tax receipt for the parcel.

## CERTIFICATION

*Please read and initial the following statements:*

1. I have read the statements and questions included in this application and understand them and certify that all responses are true and accurate. \_\_\_\_\_
2. I have the authority to act on behalf of the owners and occupants of the Property, and I or my spouse have not claimed more than one primary residence as a homestead for the purpose of a property tax credit in Missouri or elsewhere. \_\_\_\_\_
3. I understand the County will rely on the information provided by the Applicant in this Application and this Certification is a material representation in evaluating this application for property tax credit. \_\_\_\_\_

I specifically certify the following:

- a. I am a resident of the State of Missouri.
- b. I am the owner of record of the homestead for which I am seeking a property tax credit or have legal or equitable interest in such property by written instrument.
- c. I am liable for the payment of real property taxes on such homestead.
- d. I occupy the homestead as my primary residence for which I am seeking the Montgomery County Senior Real Estate Tax Relief credit.

**I understand I may be charged with a misdemeanor as stated in Section 575.050 and/or 575.060, RSMo if any information submitted in this application is found to be a false declaration and I am not aware of any information that would prohibit or disqualify me from receiving the tax credit for the homestead identified in this Application.**

|                           |                                   |
|---------------------------|-----------------------------------|
| Applicant Signature _____ | Applicant<br>Name (Printed) _____ |
| Applicant Signature _____ | Applicant<br>Name (Printed) _____ |

ELIGIBILITY VERIFICATION

ASSESSOR

Initial Credit Year Assessed Valuation \_\_\_\_\_ Book & Page of Primary Residence \_\_\_\_\_

Reduced value since initial credit year \_\_\_\_\_ New Construction \_\_\_\_\_ Taxing District  
Changes \_\_\_\_\_

Assessor Signature: \_\_\_\_\_

Collector

Credit Amount \_\_\_\_\_ Credit Amount Noted on Tax Statement \_\_\_\_\_

Collector Signature: \_\_\_\_\_

County Clerk

Registered Voter of Montgomery County \_\_\_\_\_

County Clerk Signature: \_\_\_\_\_

Commission

Approved ☐ Yes ☐ No Reason \_\_\_\_\_

Presiding Commissioner Signature: \_\_\_\_\_

1<sup>st</sup> District Commissioner Signature: \_\_\_\_\_

2<sup>nd</sup> District Commissioner Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_