## **Municipality of Anchorage**

## **2020** Residential Property Tax Exemption Application

## **Anchorage Municipal Code 12.15.015**

Twenty percent of the assessed value of owner occupied residential property, up to a maximum of \$50,000 of assessed value, shall be exempt from property taxation

## Application must be received or postmarked on or before MARCH 15, 2020.

- To qualify, the applicant must be the owner of record prior to January 1, 2020;
- Upon initial application, the applicant must have been a resident of the State of Alaska for the entire year of 2019.
- The property must be owned and occupied as the primary residence and permanent place of abode of an eligible applicant prior to January 1, 2020; and when absent, the dwelling is not leased or rented to another.
- In each subsequent year, the property must be owned and occupied as the primary residence and permanent place of abode of the eligible applicant for at least 185 days prior to January 1 of each exemption year, and when absent, the dwelling is not leased or rented to another.
- It is the applicant's responsibility to notify the assessor of any change in ownership, property use, residency, permanent place of abode or other factor affecting qualification for the exemption. Failure to notify may result in loss of the exemption retroactively, payment of back taxes, penalties and interest.

It is the property owner's responsibility to ensure receipt of the application by the MOA.

\*\*\*\*Please print and complete information below\*\*\*\*

****Pleas	se print and comp	lete inf	formation below*	***
Real Property Number (Parcel ID Number)			Personal Property ID# (Mobile Home)	
Name of Applicant: Last Name	First Name	МІ	Birth Date	Applicant Daytime Phone Number
Mailing Address:				
Physical Address:				
Dwelling Type: Single Family Condominium Duplex Is this your current residence?  4-Plex Mobile Home Other Yes No				
When did your <b>most recent</b> Alaska residency begin? This means the month, day and year you arrived in/or returned to Alaska. Month – Day – Year:				
Is any portion of this property leased or	rented to another?		Yes	No
***An exemption application will be de I CERTIFY: That the information contained above. I authorize the MOA Municipal Ass falsely applying for this exemption, or failin payment of back taxes, penalties and interes	in/with this form is TR sessor to obtain inform g to notify the Municip	UE and nation ne	CORRECT. That I mee	t the qualifications set forth eligibility. I understand that
Signature of Applicant:			Date:	
MAIL TO:  Municipality of Anchorage propappcs@muni.org Property Appraisal Division OR PO BOX 196650 Fax; 343-6599 Anchorage, AK 99519-6650  ****** FOR OFFICE USE ******** DO NOT WE		ni.org	Property Appraisal 632 W 6 <sup>th</sup> Avenue, Suite 300 Anchorage, AK 99501	
Prior Filing Ownership New Filing Control#:			Entered by: Date:	