

**Municipality of Anchorage**  
**2020 Senior Citizen, Disabled Veteran Exemption Application**

AS 29.45.030 (e)-(i) Exemption up to \$150,000 of valuation

To qualify for tax exemption, property must be applicant's primary residence and permanent place of abode prior to January 1, 2020. Upon initial application, the owner must have been a resident of the State of Alaska for the entire year of 2019. In each subsequent year the property must be owned and occupied as the primary residence and permanent place of abode for at least 185 days prior to January 1, and when absent, the dwelling is not rented or leased to another.

**Senior Citizen** must be 65 on or before December 31, 2019. **New applicants must provide proof of age.** **Disabled Veteran** must provide a **current VA letter** (dated within one year) stating at least a 50% service connected disability.

**Mail to:** Municipality of Anchorage  
 Property Appraisal  
 P.O. Box 196650  
 Anchorage, AK 99519-6650

**OR** **Submit in person to:**  
 Property Appraisal  
 632 West 6th Avenue, Suite 300  
 For Information call: (907) 343-6770  
**E-mail: [propappcs@muni.org](mailto:propappcs@muni.org)**

**Application must be complete and received or postmarked on or before March 15, 2020.**

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

*Property owners are required to notify the assessor of any change in ownership, property use, residency, status of disability or other factor affecting qualification for the exemption.*

Real Property Number (Parcel ID Number)		Personal Property Number (Mobile Home)		VA Number	
Name of Applicant: Last Name		First Name	MI	Birth Date	Applicant Daytime Phone Number
Name of Spouse: Last Name,		First Name,	MI	Birth Date	Applicant 2 <sup>nd</sup> Phone Number or E-mail
Mailing Address				Property Site Address, if same as mailing write 'same'	

- I am applying for a SENIOR CITIZEN exemption.  
 I am applying for a SENIOR WIDOW / WIDOWER exemption (Must be 60 years of age).  
 I am applying for a DISABLED VETERAN exemption.  
 I am applying for a DISABLED VETERAN WIDOW / WIDOWER exemption.

Dwelling Type:  Single Family  Condominium  Duplex  Mobile Home  Other  
 If dwelling type is a mobile home, is it on land you own?  Yes  No  
 If ownership is shared with someone other than your spouse, list your percent of ownership \_\_\_\_\_%  N/A  
 Is occupancy shared with someone other than your spouse or minor children?  Yes  No

When did your most recent 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 used for: **Commercial Purposes?**  Yes  No  
**Rental Purposes?**  Yes  No

If Yes, what percent is used for commercial or rental purposes? \_\_\_\_\_%

**I CERTIFY:** That the information I am supplying on and with this form is TRUE and CORRECT. That prior to January 1 of the year for which this exemption is sought I was a resident of the State of Alaska for the entire year and subsequently will own and occupy this property for a minimum of 185 days during each calendar year thereafter and when absent, the dwelling is not rented or leased to another. I authorize the Municipality of Anchorage to obtain information necessary to verify my eligibility. Falsely applying for an exemption or failing to notify the Municipal Assessors Office of a change in exemption status may result in payment of back taxes, penalties and interest for prior years.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SIGNATURE OF SPOUSE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE \*\*\*\*\* DO NOT WRITE BELOW THIS LINE \*\*\*\*\*

_____ New Filing	_____ Ownership	_____ Age	_____ Approved	Control # _____
_____ Prior Filing	_____ Disabled Veteran	_____ Denied	Entered by: _____	

# Municipality of Anchorage Senior Citizen Exemption Information

Timely Applications accepted through March 15<sup>th</sup> (907) 343-6770, Fax :( 907) 343-6599 [www.muni.org/pa](http://www.muni.org/pa)

- 1. Applicant must be 65 years of age** on or before December 31<sup>st</sup> of the prior year for which the exemption is sought.
- 2. Applicant must have proof of age** when filing for the first time. One of the following: A current Alaska driver license or Alaska State ID issued by DMV, birth certificate, naturalization papers, passport, baptismal certificate, military discharge papers (DD 214) or an age verification letter from the Social Security office is acceptable documentation. **If spouse is also a senior, please have them sign the application and provide proof of age.**
- 3. Applicants that have any changes in ownership, in residency, permanent place of abode or other factor affecting qualification for the exemption must file each year by March 15<sup>th</sup>.** If application is not received by March 15<sup>th</sup>, the assessor may accept a late filing if the applicant's failure to file a timely application is for good cause. Good cause includes a serious medical condition of the applicant or a member of the applicant's immediate family. In addition to the application, the applicant shall also file a letter explaining the reason for the late filing.
- 4. The application must be filled out completely.**
- 5. Applicant must own and occupy the property** as their primary residence and permanent place of abode on January 1 of the assessment year for which the exemption is sought. Each subsequent year the property must be owned and occupied a minimum of 185 days per year as the primary residence and when absent, the dwelling is not leased or rented to another.
- 6. The applicant may not own other property** that is currently or will be receiving a homeowner, Residential, Senior Citizen or Disabled Veteran exemption.
- 7. Applicant must be a resident of Alaska for the entire year prior to the exemption year.**
- 8. Widow/Widower:** Upon attaining 60 years of age, the widow/widower, of a previous program participant, may obtain an exemption under the above requirements. Must provide copies of marriage and death certificates.
- 9. If property is recorded into a trust and you are not the recorded trustee:** We do not need a copy of the entire trust, but do require a copy of the following pages of the trust: First page of Trust, Page Designating you as the owner/trustee, Page that specifically identifies the property placed into trust, and the signature/date witness page.
- 10. Change notification:** It is the responsibility of every person who obtains an exemption under this section 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 exemption retroactively, payment of back taxes, penalties and interest for prior years.**
- 11. A qualified senior citizen or disabled veteran need not file an application for successive tax years** if there is no change in ownership, in residency or permanent place of abode, status of disability, or other factor affecting qualification for the exemption.
- 12. If we have any questions, you will receive a phone call and/or letter.** Please review your tax bill for the exemption. The tax bill should reference "State Credit", if it does not; please contact our office immediately regarding the exemption.

AS 29.45.030  
3 AAC 135.085  
AMC 12.15.015

## Other Senior Citizen Resource Agencies

Older Person's Action Group  
276-1059

Senior Center  
770-2000

Mabel T. Caverly Center  
276-1496

Aging & Disability Resource Ctr. DHHS  
343-7770

# Municipality of Anchorage Disabled Veteran Exemption Information

Timely Applications accepted through March 15<sup>th</sup> (907) 343-6770, Fax :( 907) 343-6599 [www.muni.org/pa](http://www.muni.org/pa)

“**Disabled Veteran**” means: a disabled person separated from the military service of the United States under a condition that is not dishonorable, who is a resident of the state, whose disability was incurred or aggravated in the line of duty in the military service of the United States, and whose disability has been rated as 50 percent or more service connected disability by the branch of service in which that person served or by the Veteran’s Administration, with an effective date prior to January 1<sup>st</sup> of the applicable tax year.

1. **Applicants that have any changes in ownership, in residency, permanent place of abode, disability or other factor affecting qualification for the exemption, must file each year by March 15<sup>th</sup>.** In addition to the application, the veteran must submit a current letter from the Veteran’s Administration indicating a 50% or more service-connected disability percentage rating and the effective date of the disability.
2. A qualified disabled veteran need not file an application for successive tax years if there is no change in ownership, in residency, permanent place of abode, status of disability, or other factor affecting qualification for the exemption. The assessor may require proof under this section at any time.
3. If application and or Veteran’s letter is not received by March 15<sup>th</sup>, the assessor may accept a late filing if the applicant’s failure to file a timely application is for good cause. Good cause includes a serious medical condition of the applicant or a member of the applicant’s immediate family. In addition to the application and/or Veteran’s letter, the applicant must also file a letter explaining the reason for the late filing.
4. If the final disability rating required for exemption is not determined until after the period of timely filing has expired, the assessor may waive the claimant’s failure to make timely application and accept the application only if the applicant files the application for exemption with the assessor within 30 days of applicant’s receipt of the final disability rating.
5. **Applicant must own and occupy the property** as their primary residence and permanent place of abode on January 1 of the assessment year for which the exemption is sought. Each subsequent year the property must be owned and occupied a minimum of 185 days per year as the primary residence and when absent, the dwelling is not leased or rented to another.
6. **The applicant may not own other property** that is currently or will be receiving a homeowner, Residential, Senior or Disabled Veteran exemption.
7. **Applicant must be a resident of the State of Alaska for the entire year prior to the exemption year.**
8. **Application must be filled out completely.**
9. **Widow/Widower:** The widow/widower, of a previous program participant, may obtain an exemption under the above requirements. Must provide copies of marriage and death certificates.
10. **If property is recorded into a trust, and you are not the recorded trustee.** We do not need a copy of the entire trust, but do require a copy of the following pages of the trust: First page of Trust, Page Designating you as the owner/trustee, Page that specifically identifies the property placed into trust, and the signature/date witness page.
11. **Change notification:** It is the responsibility of every person who obtains an exemption under this section to notify the assessor of any change in ownership, property use, residency, permanent place of abode, status of disability or other factor affecting qualification for the exemption. **Failure to notify may result in loss of exemption retroactively, payment of back taxes, penalties and interest for prior years..**
12. If we have any questions you will receive a phone call and/or letter. Please review your tax bill for the exemption. The tax bill should reference “State Credit”, if it does not; please contact our office immediately regarding the exemption.

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