



## Town of Holbrook

50 N FRANKLIN ST, HOLBROOK, MA 02343 / Telephone: 781-767-4315 Fax: 781-767-9057

### TOWN OF HOLBROOK SENIOR CITIZEN TAX WORK-OFF ABATEMENT PROGRAM APPLICATION

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ DOB \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

OWNER \_\_\_\_\_ TRUSTEE \_\_\_\_\_ SPOUSE \_\_\_\_\_

#### **Eligibility:**

**60 years of age or older.**  
**Domiciled in Holbrook, MA.**  
**Homeowner or trustee or spouse of same.**  
**Residing at property for which tax relief sought.**

**Income limitations:**  
**\$30,000.00 Individual.**  
**\$45,000.00 per household**

**Only one tax credit per household may be given.**

If you meet all the requirements, please complete the following application.

#### **Section I: Tax Information**

Attestation: I am 60 years of age or older. \_\_\_\_\_

Attestation: I am domiciled at the street address entered above. \_\_\_\_\_

Attestation: Attached is a copy of my 2009 Income tax filing. \_\_\_\_\_

**Section II: Work Placement**

Do you have any medical restrictions, which might affect the type of work you do?

\_\_\_\_\_

Please list past work & volunteer experiences as well as types of skills, which would qualify you for a particular volunteer opening:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If I am accepted for the Tax Credit Program, I understand that I may work for a maximum credit of \$500 per year at a rate of the state minimum wage (currently \$8.00) per hour, and that this tax credit can only be applied toward my Town of Holbrook real estate tax bill.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\* The Town of Holbrook reserves the right to discontinue a volunteer's participation in the program if the Town deems the volunteer's participation to be nonbeneficial to the volunteer, the program or the Town.

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**Section III: Disposition of application**

Interviewed on \_\_\_\_\_

Eligible \_\_\_\_\_

Ineligible \_\_\_\_\_

Placement \_\_\_\_\_

Waiting List for \_\_\_\_\_

Signature \_\_\_\_\_