



Town of Cumberland, Maine

290 Tuttle Road, Cumberland, ME 04021

Telephone (207) 829-2205 • Fax (207) 829-2214

June 27, 2016

Dear Cumberland Resident

Attached is the **2016 Senior Property Tax Assistance Application**. You may be eligible for this program if you meet all of the following criteria:

- 1) you are 62 years of age or more*
- 2) have a homestead in Cumberland*
- 3) have been a resident of Cumberland for at least 10 years*
- 4) have a combined household income that does not exceed \$69,000.*

Please fill out the attached application and follow the instructions. Upon completing the application, please contact Annemarie at 829-2205 or adawson@cumberlandmaine.com to set up a meeting to finish the process. Only one application per household is allowed for this program.

Sincerely,

William R. Shane

Town Manager



TOWN OF CUMBERLAND SENIOR PROPERTY TAX ASSISTANCE



Application Deadline-August 1, 2016

To qualify for this program, you must meet the following qualifications:

- 1) be 62 years of age or more
- 2) have a homestead in the Town of Cumberland
- 3) been a resident of the Town of Cumberland for at least 10 years
- 4) combined household income does not exceed \$69,000

You must meet all 4 of the criteria above to be eligible for this program.

Name: _____

Address of Residence: _____

Home Phone Number: _____

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How to Apply for the Senior Property Tax Assistance Program:

Step #1: Fill out the application above.

Step #2: Please call, **829-2205**, and ask for Annemarie or email, **adawson@cumberlandmaine.com**, to schedule an appointment to review and complete your application.

Step #3: Please bring the following documents to your appointment:

- **2015 Tax Filing** (1040, 1040A, 1040EZ)
-If you do not file taxes, please bring 1099's or other forms to document income.
- **Form of Identification** (Drivers License, Maine State I.D., Passport)
- **For Rental Properties**, please bring a copy of the lease.

Step #4: Attend appointment at the Cumberland Town Hall.

(Insert Date & Time of Appointment Here)

For Town Use Only:

Eligible Refund Amount: _____

Signature of Processing Agent: _____ **Date:** _____

Signature of Town Manager: _____ **Date:** _____