



**Town of Stow**  
**Council on Aging**  
 380 Great Road, Stow, MA 01775  
 (978) 897-1880

**SENIOR CITIZEN PROPERTY TAX WORK-OFF PROGRAM**  
 (General Laws Chapter 59 Section 5K)

**FY'13 APPLICATION**

This application is not open to Public Inspection

NAME: \_\_\_\_\_ TEL. #: \_\_\_\_\_  
PLEASE PRINT

ADDRESS: \_\_\_\_\_ STOW, MA 01775

SOCIAL SECURITY #: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

1. Are you 60 years of age or older (as of January 1, 2012)?  YES  NO  
 (If 1<sup>st</sup> year of application, please attach copy of birth certificate.)
2. Have you owned and occupied as of December 31, 2011, as your principal residence, the property for which taxes are paid?  YES  NO

**SOURCES OF INCOME FROM 2010 CALENDAR YEAR**

*(The Town of Stow will consider all financial information submitted **CONFIDENTIAL**.  
 Please provide verification for all sources of income)*

<u>SOURCE:</u>	<u>GROSS ANNUAL AMOUNT:</u> <i>(Total Household)</i>
Wages, Salaries and other Compensation.....	\$ _____
Interest.....	\$ _____
Ordinary & Qualified Dividends.....	\$ _____
Capital Gain.....	\$ _____
IRA Distributions.....	\$ _____
Pension & Annuities.....	\$ _____
Rental Income.....	\$ _____
Social Security Benefits.....	\$ _____
Supplemental Security Income (SSI).....	\$ _____
Other Income.....	\$ _____

TOTAL GROSS ANNUAL INCOME FROM ALL SOURCES: \$ \_\_\_\_\_

Applications should be filled out using the exact figures from the applicant's Income Tax Form from the previous year. If the applicant did not file taxes, please submit an estimate of Gross Annual Income for the previous year. Please **attach a copy of your 2010 Federal Income Tax Returns** in order to determine eligibility for this program.

Positions are available in a variety of Town Departments. Please indicate in which areas you would prefer to work. (Please check all potentials departments).

COA Office  Town Building  Schools  Library Other: \_\_\_\_\_

Work History: Please attach a resume, **or**, list any significant work experience and/or education and training, past experiences, which might qualify you as a participant in this program. You may include any applicable hobbies and/or community and volunteer work. Please include the organization's name, job title, responsibilities and # of years of service.

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Do you have any medical or physical limitations that might limit your ability to do certain kinds of work? Please explain. \_\_\_\_\_

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What hours are you available to work? (*Check all that apply.*)

Mornings  Afternoons  Evenings

What days of the week are you available to work? (*Check all that apply.*)

Mondays  Tuesdays  Wednesdays  Thursdays  Fridays  Sat./Sun.

What type of working conditions are you interested in? (*Check all that apply.*)

Office  Outdoors  Independent  Interactive  Quiet  Busy

What general type of work are you interested in? (*Check all that apply.*)

Clerical/Administrative  Physical Labor/Skilled Maintenance  Other: \_\_\_\_\_

Do you have experience in any of the following areas? (*Check any that apply.*)

Clerical/Secretarial  Reception/Telephone  Building/Grounds Maintenance  
 Accounting  Word Processing  Teaching  
 Computers  Spreadsheets  Data Entry

If you have experience with computers, please describe the type of computers and software programs used: \_\_\_\_\_

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EMERGENCY CONTACT: (Please be sure to give the name, address, and phone # of TWO persons to be notified in case one cannot be reached).

NAME: \_\_\_\_\_ TEL. #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_ TEL. #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SIGNATURE:

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct and complete.

If I am accepted as a participant in the Stow Senior Citizen Property Tax Work-off Program, I understand that I may work a maximum of 125 hours at \$8.00 per hour (i.e. maximum of \$1,000.00) and which can only be credited as a reduction to my Town of Stow Property Tax for FY'13.

The Senior Citizen Property Tax Work-Off Program participants **MUST** observe the rules of confidentiality. Confidentiality means that anything you see or hear during the course of your work assignment that relates to Town residents **MUST NOT** be shared with anyone.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

The Town of Stow reserves the right to discontinue a volunteer's participation in the program if the Town deems the volunteer's participation to be detrimental to the volunteer, the program, or the Town.

Once completed, please return this application with a copy of your most recent Federal Income Tax Return to the COA Office.

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*ASSESSORS' USE ONLY*

The applicant above: \_\_\_\_\_ Meets \_\_\_\_\_ Does NOT Meet  
the qualifications for the Senior Citizen Property Tax Work-Off Program.

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\_\_\_\_\_  
Board of Assessors

\_\_\_\_\_  
Date