

Town of Stow 380 Great Road, Stow, MA 01775 Assessors: (978) 897-4597 COA: (978) 897-1880

# Fiscal Year 2025 PROPERTY TAX WORK-OFF PROGRAM

#### **GOAL OF PROGRAM:**

To offer Stow senior citizens and veterans a program to provide services to the town in exchange for a reduction in their tax bills. The work program ("fiscal year session") runs from October 1<sup>st</sup>, **2023** until September 30<sup>th</sup>, **2024**. All applications received will be reviewed and approved based on their skills that best match the needs of the Town Departments. The applicants will no longer be selected on a "first come first serve" basis. Not all participants will be chosen for positions within the Town. Interested participants must apply through the Assessors' Office.

#### **ELIGIBILITY REQUIREMENTS:**

- Seniors must be over 60 years of age and a resident of Stow. Veterans must have been honorably discharged (proof required). Proxy workers must be over 18 years of age. Taxpayers may receive abatements under the work-off program in addition to any property tax exemptions they may be eligible for under other statutes.
- The rate of pay cannot exceed the State minimum wage, which is currently **\$15.00** per hour for calendar year **2023**.
- The maximum yearly benefit for <u>Seniors</u> is per household is \$2,000 (which is approximately 133 hours). For <u>Veterans</u>, the maximum yearly benefit per household is \$1,500 (which is approximately 100 hours).
- Income limits for seniors (from 2022 tax return) are: One Person Household: Not to exceed \$ 104,500 Two Person Household: Not to exceed \$ 119,450 Income limits for veterans are not applicable.
- Skill Requirements: Must have skills that match the needs of the Town.

## APPLICATION PROCEDURE:

- Application for acceptance in the program <u>must</u> be filed yearly. Forms are available from the Assessors' Office at 380 Great Road, their website (<u>www.Stow-MA.gov/board-assessors</u>) and from the Council on Aging (COA) at 509 Great Road.
- Application forms and documents must be returned to the Assessors' Office which will process the applications and will assist in filling them out if needed.

#### WORK PROCEDURE:

- Program Participants must keep a record of the dates and hours worked on a daily or monthly time sheet. Department Heads must validate dates and hours, sign the time sheet, and submit it to the Assessors' Office as soon as possible at the end of each month.
- Excess hours worked will be unpaid and cannot be carried forward to a future fiscal year session.

#### TREATMENT OF TAX REDUCTION:

- <u>Dept. of Revenue</u>: The amount of the property tax reduction the taxpayer receives under this statute is not considered income for the purpose of state income tax withholding, unemployment compensation or workmen's compensation. The tax reduction is, however, considered income for the purposes of federal income tax.
- <u>Federal (IRS)</u>: Medicare (1.45%) and OBRA (7.50%) will be deducted from the gross amount earned. Upon termination from the program, a participant may elect to close their OBRA account and be reimbursed.
- The net amount will be applied to the actual tax bill for fiscal year **2025**, divided equally between the February 1st and May 1st quarters with an additional commensurate CPA surcharge credit.

### PARTICIPANT STATUS:

Taxpayers performing services in return for property tax reductions are employees for the purposes of municipal tort liability. Stow will therefore be liable for damages or injuries to third parties and for indemnification of the program participants to the same extent as they are in the case of regular municipal employees.



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

#### Fiscal Year 2025 APPLICATION – SHORT FORM (FOR APPLICANTS WHO PARTICIPATED LAST YEAR)

This application is not open to Public Inspection

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

EMAIL:

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

\$

#### SOURCES OF INCOME FROM 2022 CALENDAR YEAR

(Please provide verification for all sources of income via full copy of your Federal Income Tax Return)

<u>SOURCE</u> :	<u>GROSS ANNUAL AMOUNT:</u>
	(Total Household)
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. Please attach a copy of your 2022 Federal Income Tax Returns to determine eligibility for this program. (If you did not file taxes, submit an estimate of Gross Annual Income for 2022.)

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 Property Tax Work-off Program, I understand that rate of pay cannot exceed the State minimum wage, which is currently **\$15.00** per hour for calendar year 2023 and tentatively **\$15.00** for calendar year 2024. The maximum yearly benefit per household for <u>Seniors</u> is **\$2,000** (Veterans remain \$1,500) and will be credited as a reduction to my Town of Stow Real Estate tax bill for fiscal year **2025**, after federal Medicare and OBRA deductions.

Participants **MUST** observe the rules of confidentiality. Confidentiality means that anything seen or heard during work assignments that relates to other town residents or employees **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 Assessors' Office at 380 Great Road. You may not commence any assignment till the Board of Assessors has approved your participation in the Property Tax Work-off Program.


#### ASSESSORS' USE ONLY

The applicant: \_\_\_\_\_Meets or \_\_\_\_\_Does Not Meet the qualifications for the Property Tax Work-Off Program.

Board of Assessors

Date



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

Fiscal Year **2025** APPLICATION – LONG FORM

(FOR NEW APPLICANTS OR USING A PROXY)

This application is not open to Public Inspection

NAME:	_ TEL. #:
NAME:	
EMAIL:	
ADDRESS:	STOW, MA 01775
SOCIAL SECURITY #:	_ DATE OF BIRTH:
Do you own and occupy your Stow home and is it you pay taxes on)? YES NO	your principal residence (which
SOURCES OF INCOME FROM 2022 (Please provide verification for all sources of income via full copy	
SOURCE:	<u>GROSS ANNUAL AMOUNT</u> : (Total Household)
Wages, Salaries, and other Compensation	
Ordinary & Qualified Dividends Capital Gain	••••••••••••••••••••••••••••••••••••••
IRA Distributions	
Pension & Annuities	
Rental Income	
Social Security Benefits	\$
Supplemental Security Income (SSI)	\$

TOTAL GROSS ANNUAL INCOME FROM ALL SOURCES:

Other Income.....

Applications should be filled out using the exact figures from the applicant's Income Tax Form from the previous year. Please <u>attach a copy of your 2022 Federal</u> <u>Income Tax Returns</u> to determine eligibility for this program. (If you did not file taxes, submit an estimate of <u>Gross Annual Income</u> for 2022.)

\$

\$

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.

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

What hours are y	you available to work?	(Check all that apply )
what hours are	you available to work:	(Oneck an 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	Accounting	<u> </u>
Reception/Telephone	Word Processing	Data Entry
Building/Grounds/Maint.	Spreadsheets	Computers

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

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

NAME 1:	_TEL. #:
ADDRESS:	
NAME 2:	_TEL. #:
ADDRESS:	

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.

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ASSESSORS' USE ONLY

The applicant: \_\_\_\_\_Meets or \_\_\_\_\_Does Not Meet the qualifications for the Property Tax Work-Off Program.