

STATEMENT OF QUALIFICATION

For Property Tax Credit or Exemption Under RSA 72:33,V

(to be submitted with Form PA-29)

USE THIS FORM ONLY IF YOUR PROPERTY IS HELD IN A TRUST OR AS A LIFE ESTATE

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| WHO | To be completed by property owners wishing to establish their status as holding equitable title/the beneficial interest owner of a trust, or holding a life estate in a property. |
| WHY | Chapter 102, Laws of 1994 has made it possible for a property owner to put their property into a trust or life estate and still be eligible for the property tax credit or exemption for which they were qualified. |
| WHEN | This completed form shall be submitted with the Permanent Application Form PA-29 (RSA 72:33) for property tax credit or exemption, to the local assessing officials of the City/Town in which such application is filed. The completed Form PA-33 becomes a permanent document and does not need to be refiled unless the status of the trust or life estate is changed or altered. |

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|---------------|-----------------------|------------|-----------|
| TYPE OR PRINT | LAST NAME | FIRST NAME | INITIAL |
| | MAILING ADDRESS | | |
| | CITY/TOWN | STATE | ZIP CODE |
| | LOCATION OF PROPERTY: | ADDRESS | CITY/TOWN |

I am eligible for a property tax credit or exemption against the property for which a Permanent Application Form PA-29, has been made, and do qualify as the owner of the property under 72:29,VI based upon the following: (check one)

Equitable title holder, life interest or beneficial interest owner of a trust

If this statement is checked, you must supply a copy of:

- (a) a Trust Instrument as defined in RSA 564-B:1-103 (20) **OR**
- (b) a Certification of Trust prepared in accordance with RSA 564-B:10.

Name of Trust: _____

Life estate owner

If this statement is checked, you must supply a copy of the deed showing the assigned ownership of the life estate.

All documents submitted shall be handled to protect the privacy of the applicant.

Explanation or additional details: _____

Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete.

X _____
 SIGNATURE (IN INK) DATE

 PRINT NAME TELEPHONE NUMBER