HOMESTEAD CREDIT APPLICATION FOR SENIOR CITIZENS & DISABLED PERSONS

OFFICE OF STATE TAX COMMISSIONER
24757 (5/2013)

For the Year of _____

To: (Assessor)
City or Twp.:
County:

File application with the local assessor prior to February 1 of the year for which the credit is requested.

Applicant Information

Name:			Date of Birth:
Address:			Phone No.:
Legal Description of Applicant's Homestead Property:			Parcel No:
Lot	Block	Addition	City

1. Which of the following would best describe the type of ownership of the homestead property (check only one):
   - A. Is recorded in your (and spouse's) name as owner ❒
   - B. Is being purchased by you under a contract for deed ❒
   - C. Is held in joint tenancy with one other than spouse ❒
   - D. Is held under a life estate in property ❒
   - E. Is held in a revocable trust ❒
2. Is the above-described property exempt as a farm residence? Yes ❒ No ❒
3. Do you have assets in excess of $500,000 including the value of any assets gifted or otherwise divested within the last three years, and including the market value of your homestead? Yes ❒ No ❒

Complete Schedule A

To Be Completed By The Assessor

Application is: Approved ❒ Denied ❒ _____ % reduction allowed this applicant or a maximum of $_____

Reason for denial:

Date: _____ Signature of Assessor: _____

Schedule A

The Following is an Accurate Account of Total Income for the Preceding Calendar Year
(See the back of this application for explanation of income from all sources)

4. Applicant's and spouse's income from Social Security benefits (exclude Medicare):	$	
5. Applicant's and spouse's income from salary and wages:	$	
6. Applicant's and spouse's income from interest:	$	
7. Applicant's and spouse's income from all other sources:	$	
8. Dependents' total income from all sources:	$	
9. Total income from all sources (add lines 4, 5, 6, 7, and 8):		**$**
Medical expenses actually paid during the year and not paid for by insurance:		
Total amount of health and hospital insurance premiums (exclude Medicare):	$	
Medicine and drugs:	$	
Doctor, dentist, and hospital costs:	$	
Hearing aids, eyeglasses, dentures, etc.:	$	
Transportation costs for medical care: (51 cents per mile through April 16, 2012 and 55.5 cents per mile beginning April 17, 2012)	$	
Nursing home care costs and/or home nursing care costs:	$	
10. Total medical expenses:		**$**
11. Income from all sources excluding medical expenses (line 9 less line 10):		**$** *

Applicant Signature

I declare that this application, including Schedule A, has been examined by me and to the best of my knowledge and belief is a true and correct application. I am willing to furnish proof of age, income, and assets if requested to do so by someone authorized to administer this assessment credit. I reside on the property described in this application and I hereby claim the Homestead Credit on this property as provided for in N.D.C.C § 57-02-08.1.

Date: _____ Signature of Applicant: _____

N.D.C.C. § 57-02-08.1. Homestead credit.

1. a. Any person sixty-five years of age or older or permanently and totally disabled, in the year in which the tax was levied, with an income that does not exceed the limitations of subdivision c is entitled to receive a reduction in the assessment on the taxable valuation on the person's homestead. An exemption under this subsection applies regardless of whether the person is the head of a family.

   b. The exemption under this subsection continues to apply if the person does not reside in the homestead and the person's absence is due to confinement in a nursing home, hospital, or other care facility, for as long as the portion of the homestead previously occupied by the person is not rented to another person.

   c. The exemption must be determined according to the following schedule:

      (1) If the person's income is not in excess of twenty-two thousand dollars, a reduction of one hundred percent of the taxable valuation of the person's homestead up to a maximum reduction of four thousand five hundred dollars of taxable valuation.

      (2) If the person's income is in excess of twenty-two thousand dollars and not in excess of twenty-six thousand dollars, a reduction of eighty percent of the taxable valuation of the person's homestead up to a maximum reduction of three thousand six hundred dollars of taxable valuation.

      (3) If the person's income is in excess of twenty-six thousand dollars and not in excess of thirty thousand dollars, a reduction of sixty percent of the taxable valuation of the person's homestead up to a maximum reduction of two thousand seven hundred dollars of taxable valuation.

      (4) If the person's income is in excess of thirty thousand dollars and not in excess of thirty-four thousand dollars, a reduction of forty percent of the taxable valuation of the person's homestead up to a maximum reduction of one thousand eight hundred dollars of taxable valuation.

      (5) If the person's income is in excess of thirty-four thousand dollars and not in excess of thirty-eight thousand dollars, a reduction of twenty percent of the taxable valuation of the person's homestead up to a maximum reduction of nine hundred dollars of taxable valuation.

      (6) If the person's income is in excess of thirty-eight thousand dollars and not in excess of forty-two thousand dollars, a reduction of ten percent of the taxable valuation of the person's homestead up to a maximum reduction of four hundred fifty dollars of taxable valuation.

   d. Persons residing together as spouses or when one or more is a dependent of another, are entitled to only one exemption between or among them under this subsection. Persons residing together, who are not spouses or dependents, who are coowners of the property are each entitled to a percentage of a full exemption under this subsection equal to their ownership interests in the property.

   e. This subsection does not reduce the liability of any person for special assessments levied upon any property.

   f. Any person claiming the exemption under this subsection shall sign a verified statement of facts establishing the person's eligibility.

   g. A person is ineligible for the exemption under this subsection if the value of the assets of the person and any dependent residing with the person exceeds five hundred thousand dollars, including the value of any assets divested within the last three years.

   h. The assessor shall attach the statement filed under subdivision f to the assessment sheet and shall show the reduction on the assessment sheet.

   i. An exemption under this subsection terminates at the end of the taxable year of the death of the applicant.

. . . .

4. A person whose homestead is a farm structure exempt from taxation under subsection 15 of section 57-02-08 may not receive any property tax credit under this section.

5. For the purposes of this section:

   a. "Dependent" has the same meaning it has for federal income tax purposes.

   b. "Homestead" has the same meaning as provided in section 47-18-01.

   c. "Income" means income for the most recent complete taxable year from all sources, including the income of any dependent of the applicant, and including any county, state, or federal public assistance benefits, social security, or other retirement benefits, but excluding any federal rent subsidy, any amount excluded from income by federal or state law, and medical expenses paid during the year by the applicant or the applicant's dependent which is not compensated by insurance or other means.

   d. "Medical expenses" has the same meaning as it has for federal income tax purposes, except that for transportation for medical care the person may use the standard mileage rate allowed for state officer and employee use of a motor vehicle under section 54-06-09.

   e. "Permanently and totally disabled" means the inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or has lasted or can be expected to last for a continuous period of not less than twelve months as established by a certificate from a licensed physician or a written determination of disability from the social security administration or any federal or state agency that has authority to certify an individual's disability.

INCOME

Income from all sources includes all income of any kind received during the calendar year preceding the February 1 assessment date by the person claiming the homestead credit and any dependents, including the spouse if married and living together. For example, it includes, but is not limited to, such items as:

1. Social security benefits
2. SSI benefits
3. Pensions
4. Retirement benefits
5. Salaries, wages, commissions and fees
6. Dividends or interest
7. Unemployment compensation benefits
8. Gains from the sale of property
9. Net rental income (total rental income less related expenses)
10. Net profit from any business, including farming and ranching.

* **Confidentiality.** Income and medical expenses contained in this application are confidential. However, they may be disclosed to the board of county commissioners and county auditor, as needed, to carry out their official duties.