

Department of Assessments
KSC – AS – 0708
201 S. Jackson St., Room 708
Seattle, WA 98104-3854
206-296-3920

# SENIOR CITIZEN/DISABLED PERSONS REDUCTION IN PROPERTY TAXES

File Application with the King County Assessor per RCW 84.36

For property taxes due in 2021 (2020) Income documents required

### 1. Applicant Information:

Applicant name:	/ 64:441-		Date of Birth:
Spouse/domestic partner/Co-t	enant:	/ Last	Date of Birth:
(Circle one)			decree)   Married – living apart
Physical address:		City:	Zip:
Mailing address:(If different than physical address)		City:	Zip:
	Cell phone:	Email:	
2. Age/Disability: (Proof	of age is required	)	
☐ I am a veteran with an 80 service-connected disabiling I am the surviving spouse, was at least 57 years of agranged and a parcel or Property Tax Account	d a disability determinat effective date of my dis SI Award Letter, or Proof % service-connected evaluty. (Include a copy of you /domestic partner of a page in the year my spouse the Number:	ion notice effective pricability is:  f of Disability Form complication or compensated our VA Compensation/A erson who was previous domestic partner passesses	pleted by your physician). I at 100% rate due to ward Letter) Iy receiving this exemption and I ed away.
Type of residence: (select one			
<ul> <li>☐ Single-family residence</li> <li>☐ Mobile Home Year: _</li> <li>• If mobile home, has the</li> <li>• If mobile home, do you</li> </ul>	Make:e certificate of title been	Model: eliminated?	$\square$ Yes $\square$ No
This property includes:  ☐ My principal residence a ☐ My principal residence a	•		
This property is in the name of	a Trust:□ Yes □ No	If yes, please p	rovide a copy of your Trust.
I use my residence for business  • If yes, please provide the			e used
I rent out a portion of my reside the			I for rental income.

4. Property Ownership and Oc	ccupancy:		
Date property purchased:   I am the owner, hold a lease for loccupied the residence (check one):		Date property initially occupied: a life estate for this residence.	
☐ More than 6 months last year (2	•		
☐ Less than 6 months last year (20	-	□ Na	
I have received an exemption before.  If yes, when: who		□ No	
I sold my former residence:	□ Yes	□ No	
If yes, when:		-	
I sold other property in the year 2020. If yes, where:	. □ Yes	□ No	
	ble) – 202	0 Income documents are requi	red
•		aximum Income Limit: \$58,423. Attach a c	
		ent, copies of all 1099 forms and include in	
•	•	come sources must be disclosed, not all so	
Are you required to file a federal income	tax form?	☐ Yes ☐ No	
NOTE: Failure to attach income do	<mark>cuments n</mark>	nay result in delay or denial of your	application.
Earned wages, salaries, tips (Form 1040, line 1)	\$	Public Assistance and Alimony Received	\$
<b>NET Social Security</b> (After Medicare deducted)	\$	Money received from another country	\$
VA Benefit and/or Disability Income	\$	Money received from family members	\$
Retirement, Pension, Annuity	\$	Money earned by co-owner (Provide income documents)	\$
IRA (Taxable Amount)	\$	Other financial resources	\$
Unemployment (Form 1099-G)	\$	2020 INCOME SUBTOTAL:	\$
Taxable & Non-Taxable Interest and/or Dividends (Form 1040 lines 2a, 2b & 3b)	\$	NON-REIMBURSED EXPENSES (DEDUCTIONS) Paid invoices/receipts required for the deductions below	
Business Income before Depreciation	\$	Assisted Living or Adult Family Home Cost \$	
Total Capital Gains DO NOT deduct losses	\$	n-Home Care and/or Nursing Home Cost \$	
Rental Income before Depreciation	\$	Non-Reimbursed Prescription Cost	\$
Trust, Partnership, Estate or Royalty Income	\$	Approved Medicare Advantage Plan Premiums (Excludes Supplemental Insurance or MediGap)	\$
Taxable & Non-Taxable Bonds	\$	Adjustments to Income (Form 1040, Sch 1)	\$

2020 NET TOTAL INCOME: \$

Gambling Winnings (Form W-G2)

#### 6. Certification/Signature:

#### By signing this form, I confirm that I:

- Have completed the income section of this form and all proof of income is included.
- Understand it is my responsibility to notify the King County Assessor's office if I have a change in if I have
  a change in income or circumstances and that any exemption granted through erroneous information is
  subject to the correct tax being assessed for the last five years, plus a 100% penalty.
- Declare under penalty of perjury that the information in this application packet is true and complete.
- Request a refund under the provisions of RCW 84-69-020 for taxes paid or overpaid as a result of mistake, inadvertence, or lack of knowledge regarding exemption from paying real property taxes pursuant to RCW 84.36.381 through 389.

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Signature of applicant:		 Date:	

For security reasons, please **DO NOT EMAIL** your personal information.

## Please mail your application and documents to:

King County Department of Assessments KSC- AS - 0708 201 S. Jackson St., Room 708 Seattle, WA 98104-3854

It is recommended that you redact your Social Security number and all account numbers on your documents before mailing them to our office.