

Town of Ashby

Senior Citizen Property Tax Work-Off Program

Application:

The information provided is confidential and only to be used by the Tax Work-off Committee and the Board of Assessors.

Name of Applicant : _____

Address: _____

Telephone: _____

Email Address: _____

1. Are you over the age of 60 (as of today)? ___ Yes ___ No

2. Have you owned and resided at the above property for at least a year? ___ Yes ___ No

3. Job placements may be available in a variety of town departments. Please indicate which areas you may have an interest:

- | | | |
|--------------------------------------|---|--|
| <input type="checkbox"/> Town Hall | <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Treasurer/Collector |
| <input type="checkbox"/> Police/Fire | <input type="checkbox"/> Library | <input type="checkbox"/> Highway Dept. |
| <input type="checkbox"/> Cemetery | | |

5. Typing and Computer Skills: (Circle those that you are comfortable working with)

- | | | | |
|--------------|------------|-------------|-------------|
| a. Word | b. Excel | c. Access | d. Internet |
| e. Publisher | f. Outlook | g. Facebook | |

6. Please list any past work experience, special skills, training, volunteering, or life experiences to help us match you with a job or department: _____

7. Do you have a valid Massachusetts Driver's License? _____ Yes _____ No

I certify that all statements made on or in connection with this application are true, complete and correct to best of my knowledge and belief, and are made in good faith. I understand that I will receive compensation in the form of a Property Tax Abatement. I understand that I can earn an abatement of no more than \$1,000 per household.

Applicant Signature

Date

Office Use Only

Property Tax Work-Off Committee Approval _____ Granted _____ Denied _____