\$250 REAL PROPERTY TAX DEDUCTION SUPPLEMENTAL INCOME FORM

(**N.J.S.A.** 54:4-8.40 et seq.; **N.J.A.C.** 18:14-1.1 et seq.)

THE BELOW INCOME DETAIL IS TO ENABLE THE COLLECTOR/ ASSESSOR TO DETERMINE WHICH ITEMS MAY BE EXCLUDED UNDER THE LAW AND TO DETERMINE WHETHER YOU MEET THE INCOME REQUIREMENTS OF THE LAW. THE ASSESSOR OR COLLECTOR MAY REQUEST THAT THIS INCOME STATEMENT BE SUBSTANTIATED BY FEDERAL INCOME TAX RECORDS. FAILURE TO COMPLY MAY RESULT IN LOSS OF YOUR SENIOR CITIZEN, DISABLED PERSON, SURVIVING SPOUSE, SURVIVING CIVIL UNION PARTNER PROPERTY TAX DEDUCTION.

Re: (Applicant's name)	(Address)	
	, ,	
The undersigned submits the following statem itizen, disabled person, surviving spouse, or surviving ocated at:		
Block (County/Municipality)	Lot	Qualifier
INCOME FOR THE C	CALENDAR YEAR	
NOTE: <u>If married, you must include spouse's</u> <u>The tax assessor/collector will determine</u>		ns will be EXCLUDED.
	<u>Applicant</u>	<u>Spouse</u>
Pension, Annuity, Retirement (PRIVATE)	\$	\$
2. Salary/Wages/Tips/Bonuses/Commissions		· · · · · · · · · · · · · · · · · · ·
3. Interest		
 Dividends (Ordinary and Qualified) 		
 IRA Distributions 		
6. Capital Gains		
7. Business Income		
8. Income from Rents/Royalties		
9. Unemployment		
10. Alimony		
11. Other income		
12. Social Security Benefits		
13. Federal Pension/Railroad Pension		
14. State, County, Municipal Pension		
15. Disability Benefits		
Total Yearly Income (sum of items 1-15	5) \$	
For Asse	essor/Collector Use Only	
Excludable income \$	Total income after exclusion \$	
certify the above declarations are true to the be		

(Spouse's signature)

(Applicant's signature)