

TOWN OF CHARLTON



Board of Selectmen
(508) 248-2200

Council on Aging
(508) 248-2231

SENIOR TAX WORK OFF PROGRAM
VOLUNTEER APPLICATION

DATE _____

PERSONAL AND TAX INFORMATION

(Please Print)

Name _____ Date of Birth _____

Address (Domicile) _____ Mailing (if different) _____

Telephone _____

Are you sole owner of said property? _____ If not, name co-owner _____

Is said property subject to a trust? _____ Name & address of trustee _____

Do you currently receive any tax exemptions from the Assessor's Office? _____

Please specify _____

Have previous taxes on said property been paid to date? _____

Approximate amount paid for yearly property tax _____

VOLUNTEER POSITION INFORMATION

Please list any skills, experience or abilities you may have regarding previous work or volunteerism.

When are you available to begin working? _____

Have you previously participated in the Senior Tax Work-off Program? _____
(Year)

OVER →

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CHARLTON SENIOR TAX WORK OFF PROGRAM

Please read carefully:

Please be advised that under the Charlton Senior Tax work off Program, offered to Senior Citizens residing in the Town of Charlton, MA, you will be required to fill out a W-4 form as well as an Employment Eligibility Verification form for federal tax purposes. To be eligible to participate in this program, you must be 60 years old and reside in the said property. In order to receive the \$500 real estate credit off your real estate tax bill, you must complete the 67 hours of volunteer service to the Municipality by December 15th of the current year. The credit will be applied to your property taxes for the following year. Every effort will be made to match the qualifications of the volunteer to the site request form.

I have read the above provisions and certify to the best of my knowledge, all information on this application is true and correct and that I understand the restrictions outlined above.

Your Signature

Date

To be completed by Council on Aging Director:

Date to begin volunteer service_____

Department(s) assigned_____

Nature of work_____

Elaine Kingston, COA Director

Date