

**Town of Eliot, Maine**  
**Property Tax Assistance Program APPLICATION**  
**DEADLINE: NOVEMBER 01, 2022**

To qualify you must answer 'YES' to the following questions: (If you don't answer YES to all the questions you do not qualify for the property tax refund)

1. Do you have a homestead exemption in the Town of Eliot, ME at the time of application? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you received a property tax refund from the State of Maine Property Tax and Fairness Credit Program? <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Has your primary residence been in the Town of Eliot for 10 (ten) continuous years prior to the date of this application? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are you 70 years of age as of completing this application? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Are your property taxes paid through the date of this application? <input type="checkbox"/> Yes <input type="checkbox"/> No
6. Are you the owner of the property at the time of application? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b><u>If you answered "YES" to all the questions above please complete the form below.</u></b>

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Property Address:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

E-mail Address:

\_\_\_\_\_

- If eligible, refund checks will be sent to the mailing address on this form by December 31<sup>st</sup>.

**NOTE: Required:** If you are a tenant in your home, you must provide documentation of your residency in Eliot for the past 10 years.

Proof of age and residency in the municipality is based on one or more of the following:		
	YES	NO
I am a registered voter in the municipality	<input type="checkbox"/>	<input type="checkbox"/>
I file income tax returns in the State of Maine	<input type="checkbox"/>	<input type="checkbox"/>
The address of my driver's license is the same as the property address above	<input type="checkbox"/>	<input type="checkbox"/>

Town of Eliot, Maine  
Property Tax Assistance Program APPLICATION  
DEADLINE: NOVEMBER 01, 2022

REMINDERS: if a renter, have you attached documentation showing residency for the past 10 years? This form must be received no later than November 01, of each year.

For assistance with the completion of this form, please call (207) 439-1813, to schedule an appointment.

Please return form to: Town Manager

1333 State Road

Eliot, ME 03903

I declare that the response on this application is, to the best of my knowledge, true and accurate.

---

Applicants signature:

Date:

---

OFFICE USE:

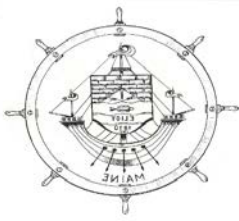
Date application received: \_\_\_\_\_

All supporting documents provided: ☐ YES ☐ NO

Amount awarded to resident: \$\_\_\_\_\_

Sent Check to Resident: ☐ YES ☐ NO Date sent: \_\_\_\_\_, Check #

\_\_\_\_\_ Completed by: \_\_\_\_\_



Town of Eliot, Maine  
1333 State Road  
Eliot, ME 03903

Maine Residents  
Property Tax Fairness Credit  
Release of Information Consent Form

TO:  
State of Maine  
Maine Revenue Services  
P.O. Box 9116  
Augusta, ME 04332-9116

I hereby authorize Maine Revenue Services to provide information relative to my Maine Residents Property Tax Fairness Credit to the Town of Eliot.

I understand that the information provided by MRS will include the full amount of the refund for which I was eligible for tax year 2021.

Maine Revenue Services will provide the refund information only if this form has been signed by the refund recipient. The information so provided is intended to be used solely for the purpose of determining my eligibility under the Town of Eliot's "Property Tax Assistance Program"

The Town of Eliot agrees upon receipt of this form and under penalties of applicable law to hold all taxpayer information contained in the form in strict confidence and to use the information contained in this form strictly for the purposes stated herein.

---

To be completed by refund recipient:

Printed Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Signature of refund recipient: \_\_\_\_\_

Date: \_\_\_\_\_

---

**Office use only:**

**Refund Amount:** \_\_\_\_\_

Request to:

State of Maine

Maine Revenue Services

Fax: (207) 624-9694

Tel: (207) 626-8475

**Did not apply:** \_\_\_\_\_

Reply to:

Town of Eliot, Maine

Town Manager

Fax: (207) 439-1415

Tel: (207) 439-1813 X107