Parcel:	(10 digits)			
Current Owner:				
Property Address:		Zip:		
her principal residence for their calend	who owns residential property as of Januar dar year 2021 Massachusetts income taxes umstances, you may be eligible if you obta	s, may be eligible for the Fi	scal Year 2	023
	emption for Fiscal Year 2023, you must converge received it in the past. If your application			the
	STATEMENT OF RESIDER	VCY		
Did you own and occupy	as your principal legal res	sidence on January 1, 2022?	YES	□ NO
If NO, Did you obtain your principal residence on or before June 30, 2022? If YES, What date was your deed recorded?			YES	□ NO
If NO, Attach explanation.	ome tax return from	?	YES	□NO
	ss used when filing your personal income tax return. return with the Commonwealth of Massachusetts. F			
Is If YES, provide a complete copy of ALL trust If more than one trust is involved, provide the	documents AND schedule of beneficiaries.		\square YES	□ NO
Do you own any other real estate ? If YES, provide property address(es):			☐ YES	□NO
Failure to truthfully answer t	the above questions and complete this application in request for a residential exemption.	full will result in the denial of yo	ur	
I certify under pains and penalties of per	jury that the information provided is true and c	orrect.		
Applicant First Name:	Applicant Last Name:		(please print)	
Applicant Signature:	Date:	Telephone:		

If the credit does not appear on your Fiscal Year 2023 third quarter tax bill, you may file an application for the exemption by April 3, 2023.

If you have questions, please contact the Taxpayer Referral and Assistance Center (TRAC) at (617) 635-4287 or contact us at http://www.cityofboston.gov/assessing/contactform.asp