Greene County Missouri 2025 Senior Tax Credit Application DUE BY JUNE 30, 2025

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Parcel/Account Number (88-##-##-###-###)	Location Address (street add	ress only)
Applicant 1: Name (Last, First, Middle suffix)	Date of Birth	Phone
Applicant 2: Name (Last, First, Middle suffix)	Date of Birth	Phone
Primary Email Address		
Mailing Address: Street	City	State Zip

Please list name and date of birth for any additional occupants of the home who are also owners of record of the current deed on file.

Applicant Certification

- 1) I am claiming only one property as a homestead for purposes of a Senior Citizen Property Tax Credit in Missouri, and I do not claim real property anywhere else in the United States of America as a primary residence.
- 2) I am an owner of record of the homestead for which I am seeking a Senior Citizen Property Tax credit, or I have legal or equitable interest in such property by written instrument.
- 3) I am liable for payment of real property taxes on such homestead and am not delinquent on such taxes.
- 4) I occupy such homestead as my primary residence for which I am seeking a Senior Citizen Property Tax Credit.
- 5) I have read the statements and questions included in this application. I understand them and represent that all responses are true and accurate.
- 6) I understand I may be charged with a Class B misdemeanor as stated in RSMO §575.060 if any information submitted in this application is found to be a false declaration. I am not aware of any information which would prohibit or disqualify me from receiving a Senior Citizen Property Tax Credit for the homestead identified in this application.

Signature (Applicant 1)

Date

Signature (Applicant 2)

Date

INCLUDE DRIVER/NON DRIVER LICENSE (OR OTHER GOVERNMENT ISSUED PHOTO ID WHICH DISPLAYS DATE OF BIRTH) FOR EACH APPLICANT. <u>APPLICATIONS CANNOT BE PROCESSED WITHOUT ID.</u>

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Dear Senior Citizen Property Tax Credit Applicant:

Please retain this copy of your application. Once certified by the Senior Tax Credit staff member on this page, it serves as your official notice of the status of your application. Annual renewal is required between January 2nd and June 30th. This is not an exemption. If you are approved, you will not see any savings in your first year as your approval year establishes the 'base' year to which future taxes are set to be 'frozen'. Future capital improvements to your property will result in those improvements being assessed and taxed in the year in which they occur separately from your frozen amount.

Return Applications To:

Senior Tax Credit 940 N Boonville Ave Room 110 Springfield MO 65802 propertytaxcredit@greenecountymo.gov (417) 380-5889

----- FOR OFFICE USE ONLY BELOW THIS LINE -----

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Number of applicants	Single	Joint	Other	(enter number)	
Applicant 1: DOB	DL/non-DL	Passport	Alt Accepted	·	
Applicant 2: DOB	DL/non-DL	Passport	Alt Accepted		
Deed Information	WTY	QC	Other:		
Book Page	Individual(s)	Other	Requires	addtl docs? Y	N
List grantee name(s) on	deed of record				

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Application Review and Status								
		In-Person	Mailed	Emailed				
Representative	Date of Review	Approved	Rejected	Review Required				

Notes (list trustees or managing members from documents if applicable here as well as any other notes).