Annual Application for Senior Citizens Tax Credit Lawrence County, Missouri

Due June 1, 2025

Date of Application:		
Parcel Identification Number:	("Homestead")	
Applicant Information		
Name(s):		
(As Shown on Driver's License or Government Picture ID)		
Mailing Address:		
City: State: Zip Code:		
Telephone Number: [] Cell [] Land Lin	ne	
E-mail Address:		
Eligibility Information		
Applicant's Age: Date of Birth:		
Physical Address of Primary Residence/Homestead:		
[] Yes [] No Do you own the Primary Residence/Homestead listed above?		
[] Yes [] No Do you own the Primary Residence/Homestead listed above with another person(s)? *	
[] Yes [] No List name(s) and ages of other owner(s):		
[] Yes [] No Is the primary Residence/Homestead owned by an in Trust, or other entity? *		
[] Yes [] No Are you a Missouri resident?		
[] Yes [] No Are you responsible for paying property taxes on the Primary Residence/Homeste	ad listed above?	
[] Yes [] No Are taxes on the Primary Residence/Homestead paid through the current tax year	?	
[] Yes [] No Does the Primary Residence/Homestead include only your residence?		
[] Yes [] No Have any improvements or additions been made to the Homestead in the past year.	ar?	
[] Yes [] No Is the current Primary Residence/Homestead assessment under appeal?		
* If yes, you may be asked to provide supporting documentation.		
Required Documents		
When submitting this application, the Applicant must attach copies of the following documents to application, to prove Missouri residency.	, or present actual documents with your	
[] Missouri Driver's License or Government Issued Picture ID		
[] 2024 Paid Property Tax Receipt		
[] Voter Registration Card or Utility bill with your name and property/Homestead address on it		

Certification

Signature:

- 1. I have read the statements and questions included in this Application and understand them and represent that all responses are true and accurate.
- 2. I have the authority to act on behalf of the other owners and occupants of the Homestead, and that I have not claimed more than one primary residence as a homestead for purposes of a property tax credit in Missouri or elsewhere.
- 3. I understand the County will rely on the information provided by Applicant in this Application and this Certification is a material representation in evaluating this Application for property tax credit. I specifically certify the following:
 - a. I am a resident of the State of Missouri.
 - b. I am at least 62 years of age or older.
 - c. I am an owner of record of the homestead for which I am seeking a property tax credit or have legal or equitable interest in such property by written instrument.
 - d. I am liable for the payment of real property taxes on such homestead.
 - e. I actually occupy the homestead as my primary residence for which I am seeking a senior citizen tax credit.

Date:

I understand I may be charged with a misdemeanor as stated in Sections 575.050 and/or 575.060, RSMo if any information submitted in this application is found to be a false affidavit or false declaration and I am not aware of any information that would prohibit or disqualify me from receiving the tax credit for the homestead identified in this Application.

lon	Embosser or black ink rubber stamp seal	Subscribed and sworn before me, this		
		day of year		
E	*	State	County (or City of St. Louis)	My Commission Expires (MM/DD/YYYY
				//
Notary Information		Notary Public Signature		
	· •	Notary Public Name (Typed or Printed)		
		FOR O	FFICE USE ONLY	
		ELIGIBI	LITY VERIFICATION	