CITY OF DERBY OFFICE OF THE ASSESOR

City Hall 1 Elizabeth Street Derby, CT 06418

PHONE (203) 736-1455 FAX (203) 736-1480

February 1, 2023

Dear Taxpayer:

Applications for the Elderly and Totally Disabled Tax Relief Program (Circuit Breaker) will be accepted beginning February 1, 2023 through May 15, 2023. Applications are included with this letter.

This program is available to homeowners who were 65 years of age on or before December 31, 2022. It is also available to homeowners, regardless of age, who are declared totally disabled by Social Security Administration, so long as proof of disability is provided.

Veterans who are eligible for additional benefits should file at the same time, as should those eligible for additional disability benefits.

Income limitations are 49,100 for a married couple and 40,300 for a single person. Income includes wages, pensions, Social Security, interest on savings, and all other income received during the 2022 calendar year.

Proof of all income must accompany the application. This includes your 2022 Social Security statement, pension statement, interest and any other source of income.

Applicants who file a Federal Income Tax Return must present a completed copy when applying.

<u>Applicants must complete their 2022 Federal Income Tax Return before applying for the tax relief program.</u>

Please note: You can mail, e-mail or drop off your completed application accompanied with the proof of income.

Derby City Hall Assessor's Office
1 Elizabeth St.,
Derby, CT 06418

E-MAIL:

lculmo@derbyct.gov bquist@derbyct.gov

For further information please call 736-1455

Sincerely,

Betsy Quist

PLEASE PRINT OR TYPE M-35H Rev. 12/2018

STATE OF CONNECTICUT - OFFICE OF POLICY AND MANAGEMENT

APPLICATION FOR TAX CREDITS ELDERLY AND TOTALLY DISABLED HOMEOWNER

FILING PERIOD: FEBRUARY 1st through MAY 15th

OWNER GRAND LIST

1. NAME (Last)	. NAME (Last)		(Middle Initial)	(Middle Initial) YOUR BIRTI		y) YOU	YOUR SOCIAL SECURITY NO.	
2. SPOUSE'S NAM	IE (Last)	(First)	(Middle Initial)	SPOU	JSE'S BIRTH DATE (mm/dd/y	spot	JSE'S SOCIAL SI	ECURITY NO.
3. MAILING ADDR	ESS (No. and Street)		CITY OR TOW	N (D	on't Abbreviate)		STATE	ZIP CODE
4. PROPERTY ADD ONLY IF DIFFERENT FROM	RESS (No. and Street) M 3. ABOVE	CITY OR	TOWN STA	TE	ZIP CODE (OTHER NAM	ME ON PROI	PERTY
5. FILING STATUS CHECK ONLY ON			UNMARRIED	SUR	VIVING SPOUSE (AG	GE 50 TO 65)	PROOF REQU	JIRED
OR A NURSING H	ESIDENT OF A HEALT OME FACILITY IN C CURRENT PROOF REQUI	ΓAND	CHECK HERE:		IFAPPLICANT IS TO DISABLED CURRENT PROOF		СНЕСК	KHERE: □
6. DID OR WILL YO	OU FILE A FEDERAL TA	X RETUR	N FOR THE GRAND LIST	Γ ΥΕ.	AR? TYES (Attac	ch Copy)	□ NO	
A. GROSS INCOMI to wages, lottery B. NON-TAXABLE C. SOCIAL SECUR D. ANY OTHER INC	E - Includes: Federal Gro winnings, pensions, IRA E INTEREST - Example RITY OR RAILROAD RI COME NOT REFLECTED	oss Income owithdrawals: Interest for ETIREMENDER OF THE AUTORITIES AND THE AUTORITIES AND THE AUTORITIES AND THE AUTORITIES AUTORITIES AND THE AUTORITIES AND THE AUTORITIES AND THE AUTORITIES AUTORITIES AND THE AUTORITIES AND THE AUTORITIES AND THE AUTORITIES AUTORITIES AND THE AUTORITIES AND THE AUTORITIES AND THE AUTORITIES A	NG LAST CALENDAR or its equivalent. Such as, les, interest, dividends and net rom Tax Exempt Governm NT INCOME - Add Medica BOVE - Examples: Federal solves of the property of	but not t rentanent l are pr Suppl	ot limited al income (excluding dep Bonds emiums (Attach SSA 10 emental Security Income	E099) (3.\$ 3.\$ 5.\$ 0.\$	
EAPLAIN OTHER:			E. TO	TAI	Add lines 7A throu	igh 7D E	\$	
8. APPLICANT'S/ AUTHORIZED AGENT'S AFFIDAVIT The applicant or authorized agent deposes that the above statements are true and complete and claims tax relief under provisions of the Connecticut General Statutes. The property for which tax relief is claimed, is the permanent residence/domicile of the applicant. He/she is not receiving State Elderly tax benefits under section 12-129b or section 12-170d, in any town. The penalty for making a false affidavit is the refund of all credits improperly taken and a fine of not more than \$500.00. Your signature signifies that this affidavit has been read and understood.								
SIGNATURE OF APPLI X	CANT OR AUTHORIZED A	GENT	Date signed (mm/dd/yyyy)	(A	PPLICANT'S or AGENT'S)	S PHONE NO.	AGENT'S RI	ELATIONSHIP
	STOP! DO N	NOT WRIT	TE BELOW THIS LINE	- FO	R ASSESSOR'S USE	ONLY		
9. Date Application F	(in fe		ge of property use) owned by %		14.Allowable Table P	Percentage:		<u>%</u>
PROPERTY'S GROSS ASMNT:\$ APPLICANT'S GROSS ASMT: \$-				*	15. Credit Maximum: a. Line 13 or **13a		\$	
1101/11 (1.ψ	Subtract Exemptions	for: .Bli	nd -		b.TableCeiling X	K Line 10	\$	
* Based on %	of	Disab Vetera			16.a.Lesser of Line 15	sa or 15b	\$	
ownership LocalOptic					b. Minimum Gran	nt	\$	
Add'l Vets - 11. Net Assessment (based on APPLICANT'S GROSS ASMT. minus total exemptions) (MUST agree with the continuation sheet) \$					17. CREDIT AMOUNG Greater of 16a or 16		\$	
	13. Amount of Property		*13a. Amount of Frozen T	Tax:		_	-	
	\$ _ Lam satisfie	d that the	\$ above named applica	ant m				ox 13a and Box 15a
ASSESSOR'S AFFIDAVIT	- I am satisfied that the above named applicant meets all the necessary statutory requirements - This claim is disallowed for the following reason: {Per Connecticut General Statutes Section 12-170cc an applicant has the right to appeal the Assessor's decision to the Secretary of OPM, in writing, within 30 business days from the date of notice given by the Assessor}							
SIGNATURE OF	ASSESSOR OR MEM	IBER OF A	ASSESSOR'S STAFF			Date si	gned (mm/do	d/yyyy) /



STATE OF CONNECTICUT

OFFICE OF POLICY AND MANAGEMENT
INTERGOVERNMENTAL POLICY and PLANNING DIVISION

Date: December 5, 2022

To: Assessors and Municipal Agents

From: Patrick Sullivan, Assoc. Fiscal Administrative Officer

Subject: QUALIFYING INCOME-PROGRAM YEAR 2022

The following tables show the levels of qualifying income for the Elderly and Totally Disabled Tax Relief Program applications to be filed in the year 2023. These levels are to be used for the 2022 Grand List Homeowner and Renter Rebate applications, 2023 Grand List Additional Veteran's applications and may be used for any local option programs.

PLEASE NOTE: Homeowner applications that were taken for the 2021 G/L (RENEWALS) are calculated for the 2022 G/L using the 2021 qualifying income schedule, NOT the schedule below.

Homeowners Income and Grant Information –2022 Benefit Year Filing period February 1 - May 15, 2023

Income Tax Cro		edit %	Tax Credit Maximum		Tax Credit Minimum		
Over	To	Married	Unmarried	Married	Unmarried	Married	Unmarried
\$-0-	\$20,200	50%	40%	\$1,250	\$1,000	\$400	\$350
20,200	27,100	40	30	1,000	750	350	250
27,100	33,800	30	20	750	500	250	150
33,800	40,300	20	10	500	250	150	150
40,300	49,100	10	-0-	250	-0-	150	-0-

Renters Income and Grant Information – 2022 Benefit Year Filing period April 1 – October 1, 2023

Income		Maximun	n Rebate	Minimum Rebate	
Over	To	<u>Married</u>	l/Single	Married/Single	
\$-0- \$	20, 200	\$900	\$700	\$400	\$300
20,200	27,100	700	500	300	200
27,100	33,800	500	250	200	100
33,800	40,300	250	150	100	50
40,300	49,100	150	-0-	50	-0-

(Over)

Phone: (860) 418-6406 Fax: (860) 326-0494 450 Capitol Avenue-MS# 54GSU, Hartford CT 06106-1379 The standard monthly premium for Medicare Part B enrollees will be \$170.10 for 2022. Annual Medicare premiums for the year 2022 therefore, are \$2,041.20 for a single applicant and \$4,082.40 for married applicants. WE CONTINUE TO REQUIRE A FORM <u>SSA1099</u>, OR IT'S EQUIVALENT FOR EACH HOMEOWNER AND RENTER APPLICANT TO BE PROVIDED AT THE INTAKE SITE.

The <u>Additional Veterans'</u> exemption for income qualifying applicants for the 2023 G/L will be based on the following income maximums: The maximum for single applicants will be \$40,300.00; the maximum for married applicants will be \$49,100.00. Also, if applicable in your municipality, the LOCAL OPTION exemption for the Totally Disabled, Blind and Veterans' programs may use these income maximums.

<u>100% V. A. determined Disabled Veterans</u> will continue to use \$18,000.00 for single applicants and \$21,000.00 for married applicants (adjusted gross income only; non-taxable Social Security Income is not considered).

The FREEZE program income limit remains at \$6,000.00; adjusted gross income only. Social Security Income, United States Postal System and Railroad Retirement pensions are not counted as income towards the income limit for the FREEZE program.

If there are any questions regarding any of the income limits stated above, please call me at (860) 418-6406 or e-mail at patrick.j.sullivan@ct.gov

c: Martin Heft, OPM
Duke Chen, OLR, L.O.B., Room 5300 (860-240-8433)
Christopher Perillo and Robert Wysock, OFA, L.O.B., Room 5200 (860-240-0200)
Jennifer Bernier, CT Legislative Library, L.O.B., Room 5400 (860-240-8888)