



Application for Deferral of Special Assessment on Senior Citizens' Residential Property

FOR OFFICIAL USE ONLY
Date received at bonding office
Date received at Department of Revenue

- File your completed application with the taxing district bonding officer after October 1 and by November 30.
- You must complete the Income Worksheet on the back of this application.
- Remember to sign your application.

Filed with the _____ Bonding officer for _____ (year) and prior calendar years.

Applicant type: Individual Joint applicants RDP Refiling as surviving spouse New marriage Divorce

Applicant's name (last, first, M.I.)	Social Security number - -	Birth date	Age
Joint applicant's name (last, first, M.I.)	Social Security number - -	Birth date	Age
Mailing address	City	State	ZIP code
Property address (if different than mailing address)	Telephone number/message/e-mail address		

Now go to the back of the form →

THIS SPACE FOR BONDING OFFICER'S USE ONLY – MUST COMPLETE

Bonding officer's account	Date entered on bond lien docket	Bond lien docket number
Kind of bonds	Certified copy of the installment agreement attached <input type="checkbox"/>	Amortization <input type="checkbox"/>

Please provide an amortization of payment/amounts for each installment for the life of the assessment.

First installment Jan 1–Jun 30: **Due August 1** \$ _____

Second installment Jul 1–Dec 31: **Due February 1** \$ _____

Delinquent installment: **Due by January 31** \$ _____

DESCRIPTION OF PROPERTY

Manufactured Structure	Model year	Make	Home number	Square footage	# of bedrooms
	# of bathrooms	Roofing material	Siding type	Heating system	Cooling system
Platted	Lot _____ Blk _____		Legal Desc _____		
Unplatted	For all unplatted properties attach a copy of the recorded deed or contract.				
	Parcel in: T _____	R _____	Sec _____		
	As described in _____ County Containing _____ acres				
Deed	Deed information				
	<input type="checkbox"/> Deed recorded in (year) _____		<input type="checkbox"/> Contract recorded in (year) _____		
	Document/instrument number	Microfilm number	Reel	Book/volume	Page
Assessor's account number	Levy code				

BONDING OFFICER'S CERTIFICATION

Note: If more than one special assessment is being deferred, each requires a separate application. If this is the first application for deferral of this property, A CERTIFIED COPY OF THE AGREEMENT allowing payment of the special assessment by installment must be attached.

I certify that the above is a true statement of the total amount due.

Bonding officer signature	Title	Date	County	No.
X				

– THIS SPACE FOR DEPARTMENT OF REVENUE USE ONLY –

<input type="checkbox"/> Application approved	Approved by (initials)	Date approved	<input type="checkbox"/> Application denied	Denied by (initials)	Date denied	Bonding district no.
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Applicant's last name	First name and initial	Social Security number - -
Joint applicant's last name	First name and initial	Social Security number - -

List below all income for 2008. Include income earned in other states or countries. Your income eligibility is determined by Oregon law. Your household income must be less than \$39,000 (taxable and nontaxable income) to qualify.

Income Worksheet

Work and Investment Income

1. Wages, salaries, and other pay for work.....	1		00
2. Interest and dividends (total taxable and nontaxable)	2		00
3. Business net income (loss limited to \$1,000).....	3		00
a. Do you have a business located on this property? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain type of business and percentage of property used for business purposes _____			
4. Farm net income (loss limited to \$1,000)	4		00
5. Total gain on property sales (loss limited to \$1,000).....	5		00
6. Rental net income (loss limited to \$1,000).....	6		00
a. Is part of your property used as a rental? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what percentage? _____			
7. Other capital gains (i.e., stocks and bonds (loss limited to \$1,000)	7		00
8. Other income from your federal return. Identify: _____	8		00
9. Add lines 1 through 8.....	9		00

Retirement Income

10. Total Social Security, Supplemental Security Income (SSI), and railroad retirement	10		00
11. Pensions and annuities (total taxable and nontaxable).....	11		00
12. Add lines 10 and 11	12		00

Other Income

13. Unemployment benefits	13		00
14. Child support	14		00
15. Support from others not in your household. Identify: _____	15		00
16. Veteran's and military benefits	16		00
17. Gifts and grants. Total amount minus \$500	17		00
18. Gambling winnings.....	18		00
19. Other sources. Identify: _____	19		00
20. Add lines 13 through 19	20		00
21. Your total household income. Add lines 9, 12, and 20	21		00

If the amount on line 21 is **more** than the household income limit allowed (\$39,000 for 2008), you do not qualify for the Special Assessment Deferral.

DECLARATION

I declare under penalties for false swearing that I have examined all documents and to the best of my knowledge, they are true, correct, and complete. I understand a lien will be placed on this property. I understand that 6 percent simple interest accrues on each years' deferred bond amount.

Applicant's signature	Date	Joint applicant's signature	Date
X		X	