



OFFICE OF THE ASSESSOR

40 MAIN STREET
NORTH STONINGTON, CT 06359
TELEPHONE: (860)535-2877 EXT. 123

EMAIL – assessor@northstoningtonct.gov

To all North Stonington senior homeowners 65 years old or older and homeowners that have a social security disability and placed their award letter on file with the North Stonington Assessor, Good News.

The Town of North Stonington has increased the income limits to qualify for the Elderly Homeowners Program. The maximum income now is \$65,000, gross income including social security income. The benefit is on a sliding scale and is deducted from the property taxes on your residence. You must contact the North Stonington Assessor's office and apply before June 30, 2023. Applicants currently on the Elderly program do not need to apply. The benefit will be applied to the 2nd half of your January 2024 tax bill.

To apply for this new program, you will need a copy of your IRS Form 1040 and your Social Security Form(s) 1099. For applicants that do not need to file with the IRS we need all statements of income including all wages, interest, pensions, dividends, and lottery winnings. We also need your Social Security form(s) 1099.

A application for the program is included.

Sincerely,

Darryl L. Del Grosso, C. C. M. A. II
Assessor
Town of North Stonington

TOWN OF NORTH STONINGTON
2022 GRAND LIST – LOCAL OPTION APPLICATION FOR
HOMEOWNERS AND SOCIAL SECURITY DISABLED
Filing Dates: February 1, 2023 – June 30, 2023

Name: _____

Social Security Number _____ Date of Birth _____

Spouse: _____

Social Security Number _____ Date of Birth _____

Property Address: _____

North Stonington, Connecticut 06359

Mailing Address: _____

City/Town/State: _____

Income Received During Last Calendar Year:

- A. Gross Income – Includes Federal Gross Income or its equivalent. Such as, but not limited to, wages, lottery winnings, taxable pensions, IRA’s interest, dividends, and net rental income (excludes depreciation). A. \$ _____

 - B. NON-TAXABLE INTEREST – Example: Interest from Tax Exempt Government Bonds B. \$ _____

 - C. SOCIAL SECURITY OR RAILROAD RETIREMENT INCOME – Add Medicare premiums. (Attach SSA 1099) C. \$ _____

 - D. ANY INCOME NOT REFLECTED IN THE ABOVE – Examples: Federal Supplemental Security Income, Veteran’s Pensions, Veteran’s Disability Payments, and other income Not listed above. D. \$ _____

 - E. TOTAL Add lines A through D E. \$ _____
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Signature of Applicant or Agent **Date Signed**

Phone # **RELATIONSHIP**
