

OFFICE USE ONLY

# Foxborough Senior Tax Program Application Form

## Applicant Information

Name of Applicant:

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

E-Mail Address:

## Eligibility Requirements - *Please answer all the following questions*

Are you 60 or older?	Yes	No
Are you a resident of Foxborough?	Yes	No
Do you pay real estate taxes to the town of Foxborough?	Yes	No
Do you own and occupy the home for which you are receiving a tax credit?	Yes	No
Can you provide a copy of your most recent real estate tax bill?	Yes	No
Do you have your own transportation?	Yes	No

## Job Placement – *May be available in a variety of town departments. Please indicate by circling the areas you would prefer to work*

Town Hall	Council on Aging	Schools
Police	Fire	Library
DPW	Recreation	Conservation
Clerical/Office	Manual/Laborer	Other

**Applicant Statement - *If I qualify for the senior tax program, I understand I will receive the current state minimum wage per hour to earn a maximum of \$1500 credit which can only be applied to my Town of Foxborough property tax. I hereby state under the penalty of perjury that all of the representations made herein are true to the best of my knowledge.***

Name:

Date:

Signature: