



Town of Topsfield

Senior Tax Work-Off Program Application

Contact Information

Name	
Address	
Home Phone	
Cell Phone	
Email	
Emergency Contact Name	
Emergency Contact Relationship	
Emergency Contact Phone	

Eligibility

Over 60 Years?	Yes	No	DOB:
Homeowner in Topsfield?	Yes	No	
Is this your primary residence?	Yes	No	
Is your property in a trust?	Yes	No	If yes, are you a beneficiary? Documentation must be provided.
Do you have a mortgage?	Yes	No	
Do you have a reverse mortgage?	Yes	No	
Do you have a home equity loan?	Yes	No	
Meet income guidelines?	Yes	No	

Work Experience

Alternatively, a resume may be submitted.

Name of Employer	Employment Dates	Job Title/Description

Volunteer Experience

Alternatively, a resume may be submitted.

Name of Organization	Dates of Service	Description of Duties

Please describe any special skills, interests, or hobbies that could influence placement:

Are there any factors that might influence placement (e.g. seasonal schedule, physical requirements, etc.)?

Application Checklist

_____ **Complete entire application.**

_____ **Attach a copy of your most recent real estate tax bill.**

_____ **Attach pages 1 and 2 of your most recent federal Form 1040.**

_____ **Attach a completed CORI Form along with a copy of your driver's license.**

A Criminal Offender Record Information Check is required by the Executive Office of Elder Affairs.

All information contained in the applications is kept confidential and completed applications along with supporting documents are kept in a locked file cabinet.

To the best of my knowledge, all of the information provided on this application and its' supporting documents is true and complete. I understand that the Town of Topsfield may verify any or all information contained herein.

Signature: _____ **Date:** _____

FOR OFFICE USE ONLY

Granted_____ **Placement**_____

Denied_____ **Reason**_____

COA Director Signature & Date

Updated December 2019