



**VOLUNTEER FIREFIGHTERS/AMBULANCE WORKERS EXEMPTION INSTRUCTION SHEET**

**Filing Deadline:** MAY BE FILED NOW, UP TO BUT NO LATER THAN MARCH 1<sup>ST</sup>, 2024.

**Applications Accepted:** **In Person:** Monday through Friday 9:00AM to 4:30PM **\*Mail: Must be POSTMARKED no later than March** Assessor’s Office / Firefighters/Ambulance One Independence Hill Farmingville, NY 11738

**\*WHEN MAILING, REGISTERED/RETURN RECEIPT IS RECOMMENDED\***

**REQUIREMENTS:**

- New Applicants Only:**
1. The Volunteer must be the recorded owner and occupant of a one, two, three-family residence, farm home, condominium, or Co-op.
  2. Volunteer must be enrolled with at least 2 years (adopted by each municipality) or 5 years of service, with a Fire Department or Ambulance Company within the Town of Brookhaven, by March 1<sup>st</sup>, 2024.

- Renewal Applicants Only:**
1. Previously approved for the Volunteer Firefighters/Ambulance Workers Exemption.

In addition to the COMPLETED and SIGNED application The Town of Brookhaven requires **PHOTOCOPIES (NO ORIGINALS)** of the following:

**NEW APPLICANTS ONLY:**

- Submit Photocopies of:**
1. To prove ownership, you must provide one of the following:
    - a) Recorded Deed for a house/condominium, IF PURCHASED WITHIN THE PAST 6 MONTHS
    - b) Bill of Sale for Greenwood Village
    - c) Certificate of Shares for Co-op

**\*Note:** If ownership is in a “Trust”, include a copy of the Trust.
  2. To prove residency, you must provide one of the following for ALL owners and spouses (must reflect property address):
    - a) NY Driver’s License or NY Non-Driver ID
    - b) Car Registration
    - c) Voter’s Registration Card

**RENEWAL APPLICANTS:**

1. Completed application and signed by all owners and spouses.

**Approval:** If this exemption is approved, the savings will be applied to the December 2024 tax bill.

**Denial:** Notice of denials will be mailed to applicants by May 1<sup>st</sup>.

**Renewing:** The Volunteer Firefighters/Ambulance Workers Exemption **must** be renewed each year by March 1<sup>st</sup>, **until the 20<sup>th</sup>** year of active service is reached (**must** be verified by the Department Chief). If you have any concerns on when your lifetime status is reached, please contact the Assessor’s Office at 631-451-6300.

Approved exemptions will automatically receive a “Renewal Application” for the following year. Please call our office if you do not receive your renewal by January 1<sup>st</sup>, 2024.

**Receipt:** Please complete and return the attached post card “Receipt” with your application. It will be “Date Stamped” and returned to you.

**PLEASE PROVIDE LEGAL DOCUMENTATION TO PROVE CHANGE OF OWNERSHIP DUE TO TRUST, MARRIAGE, DIVORCE, DEATH, OR PRIMARY RESIDENCE.**



## **VOLUNTEER FIREFIGHTERS/AMBULANCE WORKERS EXEMPTION**

### **KEEPING US INFORMED**

Please remember, when completing your application, to provide us with your **latest** personal contact information such as, your home phone number, cell number, email address, mailing address, etc....

By providing this information, we will have the ability to contact you concerning **any** changes to your real property tax exemptions.

#### **ANY ADDITIONAL CHANGES MUST BE REPORTED TO THE ASSESSOR'S OFFICE PROMPTLY:**

It is the responsibility of the property owner or their next of kin/power of attorney to notify this office of **ALL** important changes/updates. Proof is required for any changes in: **income, ownership, trust, marital status, death, or primary residence.**

#### **Renewing Applicant:**

To continue receiving the Fire/Ambulance Workers Real Property Tax Exemption please read and answer all questions on attached application completely and accurately. ALL property owners and spouses are required to sign the application (RP-466C). Submit completed signed application with ALL supporting documents no later than March 1<sup>st</sup>, 2024.

#### **New Applicant:**

To be considered for the Fire/Ambulance Workers Real Property Tax Exemption, please read and answer all questions on attached application completely and accurately. ALL property owners and spouses are required to sign the application (RP-466C). Submit completed signed application with ALL supporting documents no later than March 1<sup>st</sup>, 2024.

**DEADLINE FOR FILING IS NO LATER THAN MARCH 1<sup>st</sup>, 2024.**

**Thank you for keeping us up to date, so that we may better serve you.**

Thank You,

**FELIX WIENCLAW**

Assessor

**For information or questions on the Fire/Ambulance Workers Exemption:**

**Office of the Assessor**  
One Independence Hill  
Farmingville, NY 11738  
631-451-6300



NYS DEPARTMENT OF TAXATION & FINANCE OFFICE OF REAL PROPERTY TAX SERVICES APPLICATION FOR VOLUNTEER

FIREFIGHTER/AMBULANCE WORKERS EXEMPTION

Do not file this form with the State Board of Real Property Tax Service (General information and instructions for completing this form are contained in Form RP-466C-Ins.)

Empty box for additional information or notes.

1. Name & address of all owners & spouses

2. Home/Cell #:
Email:
3. Name of Firefighter/Ambulance Worker:

4. Suffolk County Tax Map #: (not required if preprinted on above label) District Section Block Lot or Name of Co-op: Total shares: Shares to the unit:

5. Name of Incorporated Volunteer Fire Department or Volunteer Ambulance Service that you serve:

FILING DEADLINE: MARCH 1<sup>ST</sup>

- 6. Is the volunteer the recorded owner of the residence?
7. Is the property the primary residence of the volunteer?
8. a. Have you been an enrolled member of this organization for at least 5 years?
b. Have you been an enrolled member of this organization for at least 20 years?
c. Are you an un-remarried spouse of a deceased member who served for at least 5 years & who was killed in the line of duty?
d. Are you an un-remarried spouse of a member who is deceased & served for at least 20 years?
9. Have you been granted a lifetime exemption in any municipality within the county?
10. Is any portion of the property used for purposes other than residential, such as farming, commercial, vacant land, or a professional office?
11. IF RENEWING: Since filing your application last year, has there been any changes in:
12. Does the owner and or spouse of, own any other property in NY, or any another state that they're claiming as a primary residence, and are receiving a residency tax benefit, such as STAR or a Homestead Exemption?

SIGNATURES for ALL OWNERS and SPOUSES of, are REQUIRED for APPLICATION TO BE COMPLETE. FAILURE TO DO SO WILL RESULT IN DENIAL OF THE EXEMPTION.

I (we) hereby certify that all statements made on this application are true and correct to the best of my (our) knowledge and belief and I (we) understand that any willful false statement made herein will subject me (us) to the penalties prescribed in the Penal Law.

Table with 6 columns: First Name, M.I., Last Name, Marital Status, Signature, Date. Two rows for owner and spouse.



FILL IN NAME AND ADDRESS IN BOX BELOW

Large empty box for name and address.

**INSTRUCTIONS**  
**VOLUNTEER FIREFIGHTERS / AMBULANCE WORKERS EXEMPTION**  
**IN SUFFOLK COUNTY**

**Authorization for exemption:** Section 466C of the Real Property Tax Law authorizes the governing body of a County, Town, Village, or School District in a county having a population of between 1,400,000 and 1,500,000 according to the latest federal decennial census (only Suffolk County currently satisfies this standard) to partially exempt the residence of a Volunteer Firefighter or Volunteer Ambulance Worker.

**Computation and duration of exemption:** The Exemption is available only to members of Incorporated Volunteer Fire Companies, Fire Departments, or Incorporated Volunteer Ambulance services that have been certified as being enrolled members for at least two to five years. The municipality determines the procedure for certification. In addition, at further local option of the County, Town, Village, or School District, the exemption may be granted for the life of an enrolled member who has accrued more than twenty years of active service. In addition, at further local option, the exemption is also available to the un-remarried spouse of an enrolled member who was receiving the exemption when he or she was killed in the line of duty. The exemption may be granted only to applicants who reside in the town served by the Fire Company, Fire Department or Ambulance Service. The exemption is available only to the primary residence of the applicant and only to property (or the portion thereof) exclusively used for residential purposes.

Municipalities which offer the exemption may also choose to offer it to otherwise qualifying Volunteer Firefighters/ Ambulance Workers who are tenant-stockholders of a Cooperative Apartment Corporation. The percentage of exemption to which the volunteer member is entitled will be applied to the percentage of the total assessed value of the entire parcel that represents the tenant-stockholder's percentage of the ownership of the stock of the corporation.

**Place and time of filing application:** The application must be filed annually in the Assessor's office (or other official as designated by the municipality) on or before **taxable status date**. Taxable status date in most towns, including those within Suffolk County, is **March 1<sup>st</sup>**. Taxable status date for most villages which assess is January 1<sup>st</sup>, but the Village Clerk should be consulted for variations. Proof of certification of enrolled membership in the fire company or department or ambulance service or status as un-remarried spouse of enrolled member killed in the line of duty shall be as required by the County, Town, Village, or School District authorizing the exemption. Proof of ownership of the property needs to be filed with the owner's initial application. The Assessor may request proof of primary residence (e.g. Driver's License, Voter's Registration, Car Registration).

**TOWN OF BROOKHAVEN**  
**VOLUNTEER FIREFIGHTERS/AMBULANCE WORKERS**  
**RECEIPT**

\_\_\_\_\_  
Suffolk County Tax Map # or Name of Co-op

\_\_\_\_\_  
Item #