



LIMITED INCOME DISABILITY RENEWAL EXEMPTION
INSTRUCTION SHEET

Filing Deadline: MAY BE FILED NOW, UP TO BUT OR NO LATER THAN MARCH 1st, 2024.

Application Accepted: **In Person:** Monday through Friday 9:00AM to 4:30PM
By Mail: Must be POSTMARKED no later than March 1st. Assessor's Office / Disability Renewal One Independence Hill Farmingville, NY 11738

WHEN MAILING, REGISTERED / RETURN RECEIPT IS RECOMMENDED

- Requirements:**
1. Previously approved for the Limited Income Disability exemption.
 2. Combined **Federal Adjusted Gross Income (subject to adopted revisions of income)**, of ALL owners and spouses cannot exceed **\$58,399.99. (Adopted by each municipality)**

In addition to the **COMPLETED** and **SIGNED** application, The Town of Brookhaven requires **proof of income for all owners & spouses:**

ALL INCOME SUBMITTED MUST BE FOR THE 2022 TAX YEAR, WE CANNOT ACCEPT 2023

TO PROVE FEDERAL ADJUSTED GROSS INCOME, YOU MUST SUBMIT PHOTOCOPIES OF THE FOLLOWING, FOR ALL OWNERS AND SPOUSES.

(No Originals please, as they WILL NOT be returned to you)

1. Copy of the **ENTIRE** 2022 Federal Income tax return including **ALL** schedules & 1st page NYS.
2. Copy of Social Security, IRA, Pension, and Annuity, interest, dividends, & unemployment 1099's.
3. Copy of all W-2 showing salary & tips received.
4. Proof of any rental or business income.
5. Applicants **must** report any income towards household expenses from anyone living on premises (rent from family members, friends, or tenants) if not reported on the 1040.
6. If applicant, owner, or spouse of will turn 65 years old by December 31, 2024, and receiving the STAR Basic on your tax bill then **you must file RP-425 & RP-425-IVP (automatically will be mailed to you) in addition to renewal application.** Failure to do so will result in a denial of Enhanced Star by NYS Taxation & Finance.
If you do not receive by January 1st, 2024, please contact this office.

IF YOU FILE AN INCOME TAX RETURN, YOU MUST SUPPLY A COPY OF YOUR FEDERAL RETURN WITH YOUR APPLICATION EACH YEAR.

YOU MUST SUPPLY COPIES OF YOUR 1099's FOR ITEM 2 OF THE LIST ON THE RIGHT.

ALL OWNERS & SPOUSES, MUST ATTACH PROOF OF INCOME FOR 2022

IF YOU ARE NOT REQUIRED TO FILE A TAX RETURN, YOU MUST SUPPLY PHOTOCOPY PROOF OF ALL SOURCES OF INCOME INCLUDING ALL 1099'S. WE RESERVE THE RIGHT TO REQUEST ADDITIONAL INFORMATION AND/OR AN OFFICIAL TAX RETURN TRANSCRIPT FROM THE IRS.

PLEASE PROVIDE LEGAL DOCUMENTATION TO PROVE ANY CHANGES IN INCOME, OWNERSHIP, TRUST, MARRIAGE, DIVORCE, DEATH, OR PRIMARY RESIDENCE.

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

Denial: Notice of Denials will be mailed to applicants by May 1st.

Mandatory Renewing: **The Limited Income Disability Renewal exemption must be renewed each year by March 1st.** 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 1st.

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



**LIMITED INCOME DISABILITY
RENEWAL 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.

To avoid disruption and to continue to receive your Limited Income Disability Real Property Tax Exemption please read and answer all questions on attached application completely and accurately and supply ALL supporting documents no later than March 1st, 2024. ALL property owners and spouses of are required to sign the application (RP-459C RNW).

DEADLINE FOR FILING IS NO LATER THAN MARCH 1st, 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
Limited Income Disability Exemption:**
Office of the Assessor
631-451-6300

Local Social Security office 1-866-771-1991
Toll Free 1-800-772-1213



NYS DEPARTMENT OF TAXATION & FINANCE
OFFICE OF REAL PROPERTY TAX SERVICES
RENEWAL APPLICATION FOR PARTIAL TAX EXEMPTION REAL PROPERTY OF PERSONS WITH DISABILITIES AND LIMITED INCOMES

Do not file this form with the Office of Real Property Tax Services
(General information and instructions for completing form are contained in RP-459-C-RNW-Ins.)

1. Name & mailing address of all owners & spouses of:

2. Home/Cell #: _____

Email: _____

3. Date of birth of all owners and spouses: _____

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

5. Since filing your application last year, has there been any changes in:
a. Title of property (due to addition, deletion, or death of owner)? Yes No
b. Legal residence or occupancy of the property (e.g. confinement of owner in hospital, nursing home, divorce, legal separation, or abandonment by spouse)? Yes No
c. Use of residence for other than residential purposes (store, office, farm)? Yes No
If you answered Yes to any of the above questions, please explain and attach applicable documentation:

6. Is the owner and/or spouse turning 65 years old by December 31, 2024? Yes No
Receiving the STAR Basic exemption on your tax bill you must file RP-425 & RP-425-IVP (automatically will be mailed to you) in addition to renewal application. Failure to do so will result in a denial of Enhanced Star by NYS Department of Taxation & Finance. If you do not receive by January 1st, 2024, please contact this office.

7. Does a child (or children), including those of tenants living on the premises, attend public school in Grades K - 12? Yes No
If there was a child(ren) that resided on the premise and they no longer reside or attend public school from the prior year, an official letter from the school district stating that there are no longer any students registered for school at your address. Submit the letter with your application to receive exemption off the school line. List the name, age of child(ren). & location of the school:

8. Does anyone else other than the owners or owner's spouses reside at the premise? Yes No
If Yes, you MUST provide all names of adults residing on the premises. STATE NAMES, AGES, & MONTHLY FINANCIAL CONTRIBUTIONS TO THE HOUSEHOLD EXPENSES:

9. Did the owner and/or spouse of owner file a Federal Income Tax Return for the year 2022?
Yes If Yes, attach a photocopy of your ENTIRE Federal Income Tax Return including ALL schedules, and ALL supporting 1099's & 1st page of NYS.
No If No, you must fill in the INCOME WORKSHEET on the back of the application and attach proof of ALL of income, including ALL 1099's. We may also require official tax return transcript from the IRS.

10. Does the owner or spouse of, own any other property in New York, or any other state being claimed as a primary residence, are receiving a residency tax benefit, such as STAR or Homestead Exemption?
Yes No If Yes, state the address(es):

WE RESERVE THE RIGHT TO REQUEST ADDITIONAL INFORMATION AND/OR AN OFFICIAL TAX RETURN TRANSCRIPT FROM THE IRS.

FILING DEADLINE: MARCH 1ST



FILL IN BOX BELOW NAME AND ADDRESS IN BOX BELOW

INCOME WORKSHEET

To be used by individuals not required to file a Federal Income Tax Return

APPLICANTS ARE REQUIRED TO SUPPLY PHOTOCOPIES OF ALL INCOME RECORDED BELOW.

Please report **ALL** income of **ALL** owners and/or spouses, except for an owner who is absent from the residence due to divorce, legal separation or abandonment. (Provide proof)

Enter the amounts below that would have been reported if you were required to file a federal or state income tax return (round to the nearest whole dollar). To round to the nearest dollar, drop amounts that are less than 50 cents (for example, \$1.39 becomes \$1) or increase amounts that are 50 cents or more to the next dollar (for example, \$2.50 becomes \$3.).

Social Security benefits (attach SSA1099's).	1.
Total wages, salaries, and tips (attach W-2's).	2.
Total Pensions & Annuities (attach all form 1099-R's).	3.
Total IRA distributions (attach all form 1099-R's).	4.
Total interest income & dividends (attach all form 1099's).	5.
Unemployment compensation (attach form 1099-G).	6.
Rental income to household (attach rent receipts).	7.
Alimony (attach proof of payment).	8.
Business income (attach proof).	9.
Capital gains.	10.
Other income (ex. Gambling winnings).	11.
List the types of other income on line 11:	
Add lines 1 through 11 and enter in line 12	12.

**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.

First Name	M.I.	Last Name	Marital Status	Signature	Date
First Name	M.I.	Last Name	Marital Status	Signature	Date
First Name	M.I.	Last Name	Marital Status	Signature	Date

**TOWN OF BROOKHAVEN
LIMITED INCOME DISABILITY
RENEWAL EXEMPTION
RECEIPT**

Suffolk County Tax Map # or Name of Co-op

Item #

