



APPLICATION FOR DEFERMENT OF SPECIAL ASSESSMENTS SENIOR CITIZENS, DISABLED AND MILITARY

To the Mayor and City Council, City of Blaine, State of Minnesota.

I am/We are the owner-occupant of the following described real estate situated in the City of Blaine.

PROPERTY ADDRESS: _____

LEGAL
DESCRIPTION: _____

- I am/We are 65 years or older
- I am/We are on retired by virtue of a permanent and total disability
- I am/We are a member of National Guard or military reserves on active duty

I/We hereby request that the special assessment be deferred as provided under Minnesota Statutes 435.193 to 435.195; and City of Blaine Resolution No. 19-126. **Be advised that interest will accumulate throughout the entire life of the deferral.*

Such special assessment amount causes a hardship for me/us to make payment thereof. The following information will help substantiate my/our claim for deferral of special assessments.

Please include Evidence of Eligibility:

- Senior Citizen – Driver's license or other valid ID.
- Permanent Total Disability – Letter of Determination.
- Military – Military Orders.
- Income verification includes total Household Income, as evidenced by – Copy of latest Federal Tax Return

The City Council will consider each application on an individual basis; however, the Council's general policy is to grant hardship special assessment deferrals when the annual payment for the special assessment exceeds 2% of the adjusted gross income of the owner as determined by the most recent Federal income tax or when an owner of unplatted property is 70 years of age or older.

Please attach proof of ownership and your last income tax statement (photocopies are acceptable).

In accordance with the Minnesota Government Data Practices Act, the City of Blaine hereby informs you that some or all the information you are asked to provide is classified as private. Private data is available to you and to City staff who require it in the performance of their duties, but not to the public. The remainder of the information, including telephone numbers, is classified as public, and is available to the public. This information will be used to process your application. You may choose to withhold this information, however if you do, the City of Blaine may not be able to process your application.

I/We hereby declare, under penalties of perjury, that the foregoing statements are true and I/we make application for deferral of special assessment as outlined herein.

Dated: _____

Applicant Signature: _____

Printed Name: _____

Applicant Signature: _____

Printed Name: _____