

THE COMMONWEALTH OF MASSACHUSETTS

YARMOUTH

FISCAL YEAR

APPLICATION FOR BLIND EXEMPTION (37A)

General Laws Chapter 59, Section 5

THIS APPLICATION IS NOT OPEN TO PUBLIC INSPECTION

(See General Laws Chapter 59, Section 60.)

Must be filed with Board of Assessors on or before April 1

Name of Applicant: _____ MBLU # _____

Mailing Address : _____

Property Location: _____

Phone Number: _____ Email: _____

Have you occupied the above property as your domicile as of July 1, ? YES NO

Is the above property subject to a trust as of July 1, ? YES NO

**If yes, please attach trust documents including schedule of beneficiaires (if not already on file with assessors).*

Exemption Status:

Were you legally blind as of July 1, ? YES NO

Are you registered with the Mass. Commission for the Blind? YES NO

Certificate Number _____ Date Registered _____

Your Signature _____ Date _____

PLEASE ATTACH YOUR CERTIFICATE OF BLINDNESS

DISPOSITION OF APPLICATION (ASSESSORS' USE ONLY)

___ Ownership	___ Granted	Assessed Tax	_____
___ Occupancy	___ Denied	Exempted Tax	_____
___ Status	___ Deemed Denied	Adjusted Tax	_____

Certificate No. _____

Board of Assessors _____

Date Mailed _____
