



TOWN OF WATERTOWN

Council on Aging

SENIOR CENTER

31 MARSHALL STREET
WATERTOWN, MASS. 02472-3403
TELEPHONE: (617) 972-6490
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www.watertown-ma.gov

Anne-Marie Gagnon
Director of Senior Services

Patricia Gold, Chairperson

WATERTOWN SENIOR PROPERTY TAX WORK-OFF PROGRAM

Applications Being Accepted Now

The Town is offering the property tax work-off program to Watertown senior homeowners again this year. This program allows up to ten seniors (age 60 and older) a \$750 deduction from their property tax bill in exchange for 68 hours of work for a Town department.

Participants should be retired and must own and occupy the property for which the taxes are deducted. In addition, the applicant's skills must match those needed by the participating Town departments. Past projects have included: computer data entry, answering phones, and projects at the Library, Recreation or Public Health Departments, or at the Senior Center.

The Town gives preference to individuals whose annual income is 300% of the Federal Poverty level or less (\$35,640 for one, \$48,060 for 2). Copies of your 2015 income tax return may be requested to verify income. If space is available, past participants may be considered.

Application attached below. For more information, call the Senior Center at 617-972-6490. Thank you.

Town of Watertown Property Tax Work-Off Program 2017

RETURN TO: WATERTOWN SENIOR CENTER-31 MARSHALL ST-WATERTOWN, MA 02472

Name: _____ Telephone Number _____

Address: _____

SECTION 1

Eligibility requirements. Please answer the following questions:

	YES	NO
1. Age 60 or older		
2. Homeowner / or spouse		
3. Watertown resident		
4. Resides in property for which rebate is requested for 3 years or more		
5. Can produce copy of current property tax bill		
6. Meet limited financial resources guidelines: (Annual income: 1 person = \$35,640 or less, 2 people = \$48,060 or less)		
7. If "no" is checked for # 6 - (do not meet income guideline,) I still want to be considered for this program		

SECTION 11

1. List past experiences and types of skills which might qualify you as a participant in the program:

2. Do you have a preference for a particular Town department: _____ Yes _____ No
If yes, please specify which department: _____

Signature: _____

Date: _____