



Town of Burlington
Local ADDITIONAL VETERAN EXEMPTION Application
2024 Grand List

Filing Period February 1st through October 1st, 2024

Name _____ Date of Birth _____ SS# _____

Email address: _____

Spouse _____ Date of Birth _____ SS# _____

Address _____ Year Property Acquired _____

If resided at above address less than two years, previous address owned & occupied in Burlington.

_____ Burlington, CT

Married _____ Unmarried _____ Surviving Spouse (60-65) _____ Disabled _____ (proof required)

Did you file a federal Income Tax Return for 2023? Yes _____ (attach copy) No _____

A. Gross Income last calendar year (2023) \$ _____

B. Non-taxable interest (i.e. tax-exempt bonds) \$ _____

C. Social Security or Railroad Retirement \$ _____
Taxable and Non Taxable (attach SS1099)

D. Any income not reflected above \$ _____

Total Income \$ _____

I certify that the information provided by me is true and accurate. I understand that any false or inaccurate information will result in denial and or revocation of this benefit and that I will be liable to the Town of Burlington for repayment of said benefits.

Signature _____ Date _____ Phone Number _____

******* ASSESSOR USE ONLY *******

Qualified for local Credit: Yes _____ No _____ Reason disallowed: _____

Unique ID: _____ % Ownership _____ Amount local exemption \$ _____

Assessor

Date