



## Enhanced STAR Exemption Renewal

Dear Enhanced STAR Applicant:

The Enhanced STAR exemption is for owner occupants that are 65 years of age or older and have a federal adjusted gross income of \$86,000 or less.

This is the Enhanced STAR renewal application. Annual renewal of Enhanced STAR exemptions is required by State of New York law. We encourage you to **mail** in your application with documentation to avoid the long lines.

**PLEASE READ ALL DIRECTIONS AND QUESTIONS CAREFULLY.** Include a copy of page 1 from your **2016** Federal or New York State Income tax returns if you file a return. If you do not file tax returns, you must submit all **2016** income statements to verify income. To qualify for the Enhanced STAR exemption, the **2016** Federal Adjusted Gross Income minus taxable IRA distributions for all owner(s) and spouse(s) must be **\$86,000** or less. If your income exceeds that amount you will still be allowed the Basic STAR exemption if you continue to live on the property. **Please note that New York State legislation has added a Cost of Living Adjustment that will annually be applied to the maximum income limit.**

You should have already received the **2016** year end statements and tax return which you need to file with your application. Your completed STAR application **should** be returned soon to avoid processing delays. **The application must be returned no later than February 1, 2018.** You will receive a written notice from this Bureau if you qualify, or not qualify, for the Enhanced STAR exemption.

**You may authorize this Bureau to transmit your Social Security number(s) to the New York State Department of Taxation and Finance (DTF) for income verification next year and subsequently. If you choose this option and the DTF qualifies your income, you will not be required to submit paper documentation to this Bureau in future years. Please indicate your preference on the application.** Even if you choose this option, you must submit the paperwork requested this year.

As always, the Assessment staff is available to help you. Please call the **Exemption Hotline at 585-428-6994**, Monday through Friday, between 9:00 a.m. and 5:00 p.m., if you have any questions.

Sincerely,

Michael S. Zazzara  
City Assessor





City of Rochester  
ENHANCED STAR EXEMPTION  
2018-2019 RENEWAL APPLICATION

PLEASE RETURN APPLICATION AS SOON AS POSSIBLE  
THE LAST LEGAL DATE TO FILE AN APPLICATION IS FEBRUARY 1, 2018

SBL# \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Was the 2016 Federal Adjusted Gross Income minus taxable IRA distributions for all owner(s) and spouse(s) \$86,000 or less?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did applicant(s) and spouse(s) file for 2016: Federal Income Tax Return?		<input type="checkbox"/> YES(see#1)	<input type="checkbox"/> NO (see#2)
New York State Return?		<input type="checkbox"/> YES(see#1)	<input type="checkbox"/> NO (see#2)
1. If <b>YES</b> for either, attach a <b>copy</b> of page 1 of your return			
2. If <b>NO</b> , submit all 2016 income statements (1099's, Social Security, interest, etc.)			
<input type="checkbox"/> YES <input type="checkbox"/> NO	Does at least one of the property owners use the property as their legal residence? (If NO, please explain on back of form.)		
<input type="checkbox"/> YES <input type="checkbox"/> NO	Is there another person the City should contact if we have any questions regarding your application? Name _____ Telephone # _____ Email: _____		
<input type="checkbox"/> YES <input type="checkbox"/> NO	Since filing last year's application, has there been any change in the ownership of the property? (If an owner has died, please attach a copy of the death certificate, if not previously submitted.)		

IMPORTANT NOTICE: ALL OWNERS AND SPOUSES MUST SIGN THIS APPLICATION

**\*\* YOU MUST FILE A 2016 NY STATE INCOME TAX RETURN TO USE THIS OPTION \*\***

In the Fall of 2018 you will be able to renew your Enhanced STAR Exemption without submitting any paperwork. Please indicate below if you wish to have the City of Rochester Assessor contact the New York State Department of Taxation and Finance to verify your income for the next exemption period. The Social Security numbers that you provide in the certification area of this form will be used for that purpose. Please be assured that the utmost security and confidentiality will be observed in the use of those Social Security numbers.

\_\_\_\_\_ Yes, please use my/our Social Security numbers to verify income eligibility For future years.

\_\_\_\_\_ No, do not use my/our Social Security numbers to verify income eligibility.

I/we will submit all income tax returns and earnings statements annually.

OVER =>

NOTE: You can only have one STAR exemption in New York State and you cannot apply for or receive a residency or homestead exemption from any other state.

IMPORTANT NOTICE: ALL OWNERS AND SPOUSES MUST SIGN THIS APPLICATION

I certify that all the above information is correct and that the property listed above is my primary residence. I understand it is my obligation to notify the assessor if I relocate to another primary residence and to provide any documentation of eligibility that is requested. I understand that any misrepresentation of primary residence, age or income shall be subject to a \$100 penalty, result in the inability to receive the STAR exemption for six years and may be subject to criminal prosecution.

SIGNATURE(S)	DATE	TELEPHONE #	SOCIAL SECURITY NUMBER
X _____	_____	_____	_____
YOUR SIGNATURE			

X _____	_____	_____	_____
SPOUSE'S OR OTHER OWNER'S SIGNATURE			

IF YOU HAVE ANY QUESTIONS,  
PLEASE CALL: 585-428-6994

Please mail to:  
City of Rochester  
Bureau of Assessment  
30 Church Street, Room 101A  
Rochester, NY 14614

YOU MUST RETURN THE ORIGINAL SIGNED FORM WITH PROOF OF INCOME BEFORE WE CAN PROCESS YOUR APPLICATION.