



# Application for Alternative Veterans Exemption from Real Property Taxation

General information and instructions for completing this form are contained in Form RP-458-a-Ins.

1. Name and telephone numbers of owner(s):

2. Mailing address of owner(s):

\_\_\_\_\_  
\_\_\_\_\_  
Day No. ( ) \_\_\_\_\_  
Evening No. ( ) \_\_\_\_\_  
E-mail address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Location of property (see instructions):

\_\_\_\_\_  
Street address  
\_\_\_\_\_  
City/Town

\_\_\_\_\_  
Village (if any)  
\_\_\_\_\_  
School District

Property identification (see tax bill or assessment roll)

Tax map number or section/block/lot \_\_\_\_\_

4. Is the owner a veteran who served in the active military, naval, or air service of the United States?  Yes  No  
If No, indicate the relationship of the owner to veteran who rendered such service: \_\_\_\_\_  
If Yes, is the veteran also the unremarried surviving spouse of a veteran?  Yes  No

5. Indicate branch of veteran's service and dates of active service: \_\_\_\_\_  
(attach written evidence)

6. Was the veteran discharged or released from the active service under honorable conditions?  Yes  No  
(if Yes, attach written evidence)

7. Did the veteran serve in a combat zone or combat theater?  Yes  No  
If Yes, where did the veteran serve and when was such service performed? \_\_\_\_\_  
(attach written evidence)

8. Has the veteran received, or did the veteran receive prior to his/her death, a compensation rating from the United States Veteran's Administration or from the United States Department of Defense as a result of a service connected disability?  Yes  No  
If Yes, what is (was) the veteran's compensation rating? \_\_\_\_\_  
 Check if rating is permanent? \_\_\_\_\_  
(attach written evidence showing the date such rate was established)  
If No, did the veteran die in service of a service connected disability or in the line of duty while serving during wartime?  Yes  No (if Yes, attach written evidence)

9. Is the property the primary residence of the veteran, unremarried surviving spouse of the veteran, or Gold Star parent?  Yes  No  
If No, is the veteran, unremarried surviving spouse of the veteran, or Gold Star parent the owner of the property and absent from the property due to medical reasons or institutionalization?  Yes  No  
Explain: \_\_\_\_\_  
\_\_\_\_\_

