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Town of Kennebunkport PO Box 566 Kennebunkport, ME 04046 Attn: Nicole Evangelista State of Maine Maine Revenue Services PO Box 9116 Augusta, ME 04332-9116

Maine Residents Property Tax Fairness Credit

Calendar Year 2021
Release of Information
Consent Form

I hereby authorize Maine Revenue Services (MRS) to provide information relative to my Maine Residents Property Tax Fairness Credit to the Town of Kennebunkport.

I understand that the information provided by MRS will include the full amount of the refund for which I was eligible.

Maine Revenue Services will provide the refund information only if this form has been signed by the refund recipient. The information so provided is intended to be used solely for the purpose of determining my eligibility under the Town of Kennebunkport's "Local Property Tax Assistance Program."

The Town of Kennebunkport agrees upon receipt of this form and under penalties of applicable law to hold all taxpayer information contained in this form in strict confidence and to use the information contained in this form strictly for the purposes stated herein.

To be completed by refund recipient:				
Social Security Number:	Printed Name:			
Address:				
Signature of Refund Recipient:				
Date Signed:				
Office use only:				
Refund Amount:	Did Not Apply:			

Request to: State of Maine Maine Revenue Services Fax: (207) 624-9694 Tel: (207) 626-9696

Reply to: Town of Kennebunkport Treasurer's Office Fax: (207) 967-8470 Tel: (207) 967-4243, Ext 109

PROPERTY TAX ASSISTANCE PROGRAM TOWN OF KENNEBUNKPORT

Application Deadline - June 30, 2022

-		This year from the State ☐ Yes: If yes, please or ☐ No: If no, you are no	omplete form belo	ow.	-aimess
Name:		Home Phone No	umber:		
Property Address:					
Map, Block, and Lot	Number (on proper	ty tax bill):			
Mailing Address (if o	different than proper	tyaddress):			
E-mail Address:					
How many years ha	ve you been a full-ti	me resident of Kennebur	nkport?	_	
How many years at	your current addres	s?			
Select one option:		by check. to next year's taxes.			
Proof of residency	in the municipality	is based on one or mo	ore of the follow	ing:	
I am a registered voter in the municipality I pay motor vehicle excise tax in the municipality I pay income taxes in the State of Maine.			Yes	No 	
Required: If you ar	e a tenant in your	home, you must provid	le a copy of you	r lease.	
For assistance with appointment.	the completion of th	is form, please call Nicol	e at 207-967-160)9 to schedu	ıle an
Please return form t	6 Elm Street	gelista, Deputy Treasure , P.O. Box 566 ort, ME 04046	r		
REMINDERS:					
This form must be	ou attached a copy received by the Topplied to other out		ou may owe.		
I declare that the res	sponses on this app	lication are, to the best o	of my knowledge,	true and co	rrect:
Signature of Applica	 ınt	 Da	te		