



## **KENAI PENINSULA BOROUGH**

144 North Binkley Street • Soldotna, Alaska 99669-7520

Toll-free within the Borough: 1-800-478-4441

**PHONE:** (907) 714-2230 • **FAX:** (907) 714-2393

[www.borough.kenai.ak.us](http://www.borough.kenai.ak.us)

**MIKE NAVARRE**  
**BOROUGH MAYOR**

### **MEMORANDUM**

**TO:** Gary Knopp, Assembly President  
Members, Kenai Peninsula Borough Assembly

**THRU:** Mike Navarre, Kenai Peninsula Borough Mayor *MN*

**FROM:** Tom Anderson, Director of Assessing *TCA*

**DATE:** May 25, 2012

**SUBJECT:** An amendment to resolution 2012-045 (as amended), waiving for good cause the application deadline for the 2012 senior citizen and disabled veterans' exemption

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The assessing department has one (1) additional late-filed application for the Senior Citizen exemption from property taxes that was inadvertently omitted from the initial introduction of Resolution 2012-045, which was amended and then postponed at the May 15, 2012, meeting. The following applicant and accompanying paperwork is submitted for assembly consideration as an addition to section 2:

<b>Senior</b>	<b>Parcel No.</b>	<b>Year</b>	<b>Reason for late file</b>
Colin Lott	172-170-17	2012	Out of state from Feb 10 - Mar 2

Resolution 2012-045, as amended, considers late-filed senior citizen and disabled veteran exemptions from property taxes received between February 15 and March 31.

The assessing department has no recommendation for approval or denial, but appreciates your consideration.



# SENIOR CITIZEN EXEMPTION (INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)

2012

DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR  
APPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR  
VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

RECEIVED

MAR 29 2012

Return completed form and requested information to:  
Kenai Peninsula Borough Assessor - 144 North Binkley - Soldotna, AK 99669  
907-714-2230 or 1-800-478-4441 Fax 907-714-2393  
www.borough.kenai.ak.us/assessingdept

KPB ASSESSING DEPT

KNAPP JUANITA WALLACE REVOCABLE TRUST  
53775 E END RD  
HOMER AK 99603-9670

Assessor's Parcel Number: 172-170-17  
Physical Address: 53665 MARIMAC AVE  
Legal Description: T 5S R 12W SEC 23 Seward Meridian HM 0780116  
MARIMAC SUB REPLAT BLK 2 & 3 LOT B-2

Home Phone: <u>235-7956</u>	Applicants date of birth:	Spouses name: <u>Pamela Lott</u>
Cell Phone: <u>299-0298</u>	Applicants Social Security Number:	Spouses date of birth:
I am applying as a: <input checked="" type="checkbox"/> Senior age 65 and spouse <input checked="" type="checkbox"/> Individual age 65 or older <input type="checkbox"/> Surviving spouse age 60 or older		
Dwelling type: <input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Condominium <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling <input type="checkbox"/> Other _____		
What percent of ownership do you alone (or jointly with your spouse) have in this property? <u>100</u> %		
Is any portion of this property used for any Commercial Purposes? <u>No</u> Yes     Rental Purposes? <u>No</u> Yes		
Is occupancy shared with someone other than your spouse and/or minor children? <u>No</u> Yes		
If yes, when did shared occupancy begin? Date <u>N/A</u> What percent of the home do they occupy? <u>N/A</u> %		
If live in care is medically necessary, attach letter from the doctor.		
Do you or your spouse own property in another state? <u>No</u> Yes     Do you receive any exemptions on that property? <u>No</u> Yes		
When traveling outside the state of Alaska, at what address do you primarily reside?		
Did you receive a 2011 Alaska Permanent Fund Dividend? No <u>Yes</u>		
Will you qualify for a 2012 Alaska Permanent Fund Dividend? No <u>Yes</u> Will you or have you applied? No <u>Yes</u>		
If you answered "No" to any of the PFD questions, you must also complete KPB Supplemental Form #1 (available at the Assessing Department or online).		

**I CERTIFY:** This property is my primary residence and permanent place of abode. I will occupy it for a minimum of 185 days prior to each year in which I receive exemption. The property is not used for non residential, temporary or vacation purposes, and is my true and fixed permanent residence. I hereby certify that the information I am supplying on and with this form is TRUE and CORRECT to the best of my knowledge. I understand that willful misrepresentation is punishable by (1) forfeiture of the exemption for that year, and (2) imposition of a civil fine of up to \$1,000 for each violation; and (3) loss of eligibility to receive the next five years' exemptions.

COLIN LOTT     Colin Lott     3-28-12  
PRINT OR TYPE OWNER NAME     SIGNATURE     DATE

\*\*\*\* ASSESSOR'S USE ONLY \*\*\*\*

☐ New Filing    
 ☐ Occupancy    
 PP Age    
 ☐ Denied    
 ☐ Approved    
 Entered by:

☐ Prior Filing    
 ☐ Ownership    
2012 Perm Fund    
☐ Full    
☐ Variable    
☐ Contig

yes

AFFIDAVIT OF

Colin Lott

(Senior Citizen or Disabled Veteran Name)

AND APPLICATION FOR APPROVAL OF LATE FILING  
FOR SENIOR CITIZEN AND/OR DISABLED VETERAN

This Application is made Pursuant to A.S. 29.45.030 Required Exemptions and KPB Code 5.12.105.  
Real Property Tax-Exemptions - Senior Citizens, Disabled Veterans and surviving spouses thereof.

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition  
of good cause)

OUT OF STATE. THE PROPERTY HAD THE EXEMPTION UNDER  
MY SPOUSE'S NAME, BUT SHE PASSED AWAY. I WAS NOT OLD  
ENOUGH AT THE TIME. I WAS IN MEXICO FROM FEB 10 - MAR 2  
SO I MISSED THE DEADLINE TO FILE.

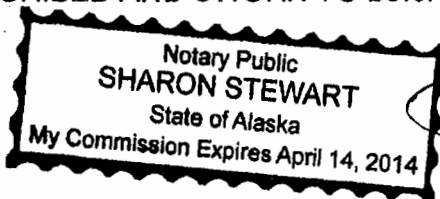
FURTHER AFFIANT SAITH NAUGHT.

Dated at Home, Alaska, this 28<sup>TH</sup> day of MARCH, 2012.

Colin Lott

(Senior Citizen and/or Disabled Veteran Signature)

SUBSCRIBED AND SWORN TO before me this 28<sup>TH</sup> day of MARCH, 2012.



[Signature]  
Notary Public, State of Alaska

My Commission Expires: 04/14/14

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(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).

**ASSEMBLY ACTION:** APPROVAL \_\_\_\_\_ DENIAL \_\_\_\_\_