SENIOR CITIZEN EXEMPTION

2012

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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

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

FEB 17 2012

	DED
Name: Howard Forbes Assessor's Parcel Number: P KPB ASSESSING	שבר
Mailing Address: 4697 SABRINA RIPhysical Address: 5 AME	
City: HOMER AK Zip 99603 Legal Description: T65 R 13W SEC 16 SEWARI	)
MERIDIAN HM 0830019 MEADOW-WOOD PLACE SUB AMENDE	D
Home Phone: 907 235-4321 Applicants date of birth: NORMA LOT	_
Cell Phone: Spo BLK	1
l am applying as a:	
Senior age 65 and spouse	
Dwelling type:	
Single Family Condominium Mobile Home Multi-Family Dwelling Other	
What percent of ownership do you alone (or jointly with your spouse) have in this property? <u>LOO</u> %	
Is any portion of this property used for Commercial Purposes? No Yes Rental Purposes? No Yes	
Is occupancy shared with someone other than your spouse and/or minor children? No Yes	
If yes, when did shared occupancy begin? Date What percent of the home do they occupy?%	
If live in care is medically necessary, attach letter from the doctor.	
Do you or your spouse own property in another state? No Yes Do you receive any exemptions on that property? No Yes	
When traveling outside the state of Alaska, at what address do you primarily reside?	
NONE	
NONE  Did you receive a 2011 Alaska Permanent Fund Dividend? No (es)	
Did you receive a 2011 Alaska Permanent Fund Dividend? No (Yes)	
Did you receive a 2011 Alaska Permanent Fund Dividend? No (es)  Will you qualify for a 2012 Alaska Permanent Fund Dividend? No (es) Will you or have you applied? No (es)  If you answered "No" to any of the PFD questions, you must also complete KPB Supplemental Form #1(available as the Assessing Department or	
Did you receive a 2011 Alaska Permanent Fund Dividend? No (es)  Will you qualify for a 2012 Alaska Permanent Fund Dividend? No (es)  Will you or have you applied? No (es)  If you answered "No" to any of the PFD questions, you must also complete KPB Supplemental Form #1(available as 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.  HOWARD FORBES  HIWAM Torking DATE  DATE	

p. 1

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.

#### Falkure to meet the filing deadline is based on the following good cause: (see reverse for definition

I called the Borough last year, 2011, about coming in to apply for my senior property tax exemption. I was told not to apply at that time. My understanding, or misunderstanding at that time, was that I should wait until I was over 65 at the start of the year in which I was eligible for the exemption, i.e. January 2012. I do not recall any mention of a February 15th application deadline at that time. That being said, memory being memory, and facts being facts, it is what it is, and I was wrong. I realize the need for deadlines etc., however I hope that, the fact that I've been paying KPB tax on this program for over 30 consecutive years, looking forward to this exemption, can somehow be found relative when considering

acceptance of my "application" being 2-days late. Denial of this application will result in a considerable
expense to our family. P.S. I FAXED THE AREICATION ON 2-16-12 BUT THE FAX ONLY
URTHER AFFIANT SAITH NAUGHT, PARTEALLY WENT THROUGH
ated at <u>AK USA CRENITU</u> , Alaska, this <u>17</u> day of <u>FEBRUARY</u> , 2012.
(Sehior Citizen and/or Disabled Veteran Signature)
UBSCRIBED AND SWORN TO before me this 17 day of February, 2012.
Notary Public RACHEL SCHINDLER RACHEL SCHINDLER
State of Alaska  My Commission Expires Sep. 17, 2012  My Commission Expires: 7-17-2012
***************************************
exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's ffice).
SSEMBLY ACTION: APPROVAL DENIAL

#### **SENIOR CITIZEN EXEMPTION**

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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)

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

WILLIAMSON JOHN CRAIG & MARY E PO BOX 2732 SEWARD AK 99664-2732

Assessor's Parcel Number:

148-060-05KPB ASSESSING Co. T

Physical Address: 615 SECOND AVE

Legal Description:

T 1S R 1W SEC 10 Seward MERIDIAN SW 0000004 ORIGINAL TOWNSITE OF SEWARD FEDERAL

		ADDN LOT 1 & 2 BLOCK 5
Home Phone: 907- 224 - 2476	Applicants date of birth:	Spouses name: Mary E. William Son
Cell Phone: 907 - 362 - 1804		Spoi
I am applying as a:	☐Individual age 65 or olde	Surviving spouse age 60 or older
Dwelling type:   ☑Single Family ☐Condominium	m	☐Multi-Family Dwelling ☐Other
What percent of ownership do you alone	e (or jointly with your spouse) ha	ave in this property?%
Is any portion of this property used for a	any Commercial Purposes?	Mo Yes Rental Purposes? No Yes
Is occupancy shared with someone other	er than your spouse and/or mind	or children? (No) Yes
If yes, when did shared occupancy begin	n? Date V	/hat percent of the home do they occupy? %
If live in care is medically necessary, atta		
Do you or your spouse own property in a	another state? No (Yes) D	o you receive any exemptions on that property?(No)
Yes unin Proved Lots When traveling outside the state of Alas	ka at what address do you prin	parily reside?
	ina, at what address do you prin	larily reside:
None		
Did you receive a 2011 Alaska Permane	ent Fund Dividend? No (Tes	)
Will you qualify for a 2012 Alaska Perm	anent Fund Dividend? No	es) Will you or have you applied? No Yes
If you answered "No" to any of the PFD questio online).	ns, you must also complete KPB Sup	plemental Form #1(available at the Assessing Department or
minimum of 185 days prior to each y temporary or vacation purposes, and I am supplying on and with this form misrepresentation is punishable by ( up to \$1,000 for each violation: and	year in which I receive exempted is my true and fixed permant is TRUE and CORRECT to 1) forfeiture of the exemption (3) loss of eligibility to receive SIGNA  ****ASSESSOR'S USB C Age Der	2/21/12  TURE DATE  SE ONLY ****
Prior FilingOwnership	Perm Fund _	FullVariableContig

(Senior Citizen or Disabled Aveteran Name)  AND APPLICATION FOR APPROVAL OF LATE FILING	CEIVED
AFFIDAVIT OF Senior Citizen John Craig Wi	

FOR SENIOR CITIZEN AND/OR DISABLED VETERAN

FEB 2 8 2012

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition
of good cause) we had heard about the exemption butdidn't
have a chance to get more intermedian about it including the
deadine before he want to Texas to visit family and
missed the filing deadline (2/8 through 2/19)
FURTHER AFFIANT SAITH NAUGHT.
Dated at, Alaska, this, day of, 2012.
IC William
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this 23 day of Tulnuay, 2012 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
Karen J. Illem
Notary Public, State of Alaska My Commission Expires: 411715
*******************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

SENIOR CITIZEN EXEMPTION 2012

INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)

DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

RPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR VELOCITY. VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

Return completed form and requested information to:

EFT.

,	907-714-2230 or	iessor - 144 North Binkley - Soldotna, AK 99669 1-800-478-4441 Fax 907-714-2393 SEB - SSESSING D gh.kenai.ak.us/assessingdept
in the state of th	Name: DASD L. She tetings	Assessor's Parcel Number: $4/N 05919047$
	Mailing Address: Y.O.Sox 893	Physical Address: 395 COHOE ST
	City Journal AK Zip 99669	
		KN2007029 SOWDOME GOL # 23 TRACTS
	Home Phone:	Spouses name:
	Cell Phone: 907-252-0393	Spc birth:
	l am applying as a: ☐ Senior age 65 and spouse Indivi	dual age 65 or older Surviving spouse age 60 or older
	Dwelling type: Single Family Condominium	Mobile Home Multi-Family Dwelling Other
	What percent of ownership do you alone ( rjointly with	your spouse) have in this property?% \( \text{GOIN} \)
	Is any portion of this property used for Commercial I any	Purposes? No Yes Rental Purposes? No Yes
	Is occupancy shared with someone other than your spo	ouse and/or minor children? (No) Yes
	If yes, when did shared occupancy begin? Date	What percent of the home do they occupy? %
	If live in care is medically necessary, attach letter from	the doctor.
	Do you or your spouse own property in another state?	No Yes Do you receive any exemptions on that property? No Yes
	When traveling outside the state of Alaska, at what add	lress do you primarily reside?
	Did you receive a 2011 Alaska Permanent Fund Divide	end? No Yes
	Will you qualify for a 2012 Alaska Permanent Fund Div	idend? No Yes Will you or have you applied? No Yes
	If you answered "No" to any of the PFD questions, you must a online).	also complete KPB Supplemental Form #1(available as the Assessing Department or
	prior to each year in which I receive exemption. T purposes, and is my true and fixed permanent reswith this form is TRUE and CORRECT to the bes	nent place of abode. I will occupy it for a minimum of 185 days he property is not used for non residential, temporary or vacation sidence. I hereby certify that the information I am supplying on and to f my knowledge. I understand that willful misrepresentation is not year, and (2) imposition of a civil fine of up to \$1,000 for each of tive years' exemptions.
$\mathcal{D}$	AND L. Spetefings	3/5/2012
	PRINT OR TYPE OWNER NAME	SIGNATURE DATE
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	SSESSOR'S USE ONLY ****  AgeDeniedApproved Entered by:
	Prior Filing Ownership 2011	S Born Fund Full Variable Contin

AFFIDAVIT OF (Senior Citizen or Disabled Veteran Name)

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
Sorra I'm Late Some ON Pan los Mo
that I Rule for this Sorry I'm lake
& word happen My Tier
FURTHER AFFIANT SAITH NAUGHT.
Dated at Sal fiture Mr., Alaska, this 5 day of March, 2012.
(Seniør Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this 5 day of 7 hand), 2012.
STATE OF ALASKA SUSAN L. GUZMAN NOTARY PUBLIC My Comm. Exp. 10 [17] My Commission Expires: 10 [17]
******************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

NCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

PLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

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

KECENVEL

www.borough.kenai.ak.us/assessingdept

EDWARD C GREENHALGH PO BOX 1074 KASILOF AK 99610-1074

Assessor's Parcel Number:

133-350-04

THE SSESSING DEV

Physical Address: 27628 KALIFORNSKY BEACH RD

Legal Description: T 3N R 11W SEC 6 Seward Meridian KN 0760167 OLD KASILOF SUB LOT 10

Home Phone:	Applicants date of birth:	Spouses name:
907-283-9111	phodito date of bitti.	1 6
Cell Phone:		Spouses date of birth:
907-398-9692		Spouses date of birth.
I am applying as a:	_	'
Senior age 65 and spouse	☐ Individual age 65 or older	Surviving spouse age 60 or older
Dwelling type:		
Single Family Condominiu	m $\square$ Mobile Home $\square$ M	fulti-Family Dwelling ☐ Other
What percent of ownership do you alor	e (or jointly with your spouse) have	in this property? 180 %
Is any portion of this property used for	any Commercial Purposes?	Yes Rental Purposes? No Yes
Is occupancy shared with someone oth	er than your spouse and/or minor ch	nildren? No Yes
If yes, when did shared occupancy beg	in? Date What	t percent of the home do they occupy? %
If live in care is medically necessary, att		
Do you or your spouse own property in Yes	another state? (N) Yes Do yo	ou receive any exemptions on that property? No
When traveling outside the state of Ala	ska, at what address do you primaril	ly reside?
	,	,
Did you receive a 2012 Alaska Perman	ent Fund Dividend? No (Yes)	
Will you qualify for a 2013 Alaska Perm	nanent Fund Dividend? No (Yes)	Will you or have you applied? No Yes
If you answered "No" to any of the PFD questionline).	ons, you must also complete KPB Supplem	nental Form #1(available at the Assessing Department or
minimum of 185 days prior to each temporary or vacation purposes, an I am supplying on and with this form	year in which I receive exemption d is my true and fixed permanent is TRUE and CORRECT to the (1) forfeiture of the exemption for	nt place of abode. I will occupy it for a n. The property is not used for non residential, t residence. I hereby certify that the information best of my knowledge. I understand that willful r that year, and (2) imposition of a civil fine of next five years' exemptions.
	$\mathcal{N} \Lambda$	1 111
Edward C GREENH		weenful 3-5-12
PRINT OR TYPE OWNER NAME	SIGNATUR	RE DATE
	, ****ASSESSOR'S USE	ONLY ****
New FilingOccupancy	, B/C_AgeDenied	Approved Entered by:
Prior FilingOwnership	Perm FundF	fullVariableContig
	1 118/	

#### AFFIDAVIT OF EDWARD C. GREENHAL GAP (Senior Citizen or Disabled Veteran Name)

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

failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
1 thought I did it LAST LEAR And did
not have to do it Again
FURTHER AFFIANT SAITH NAUGHT.
Dated at 3-8-12, Alaska, this 8 day of 11 ARCH, 2012.
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this 7 day of March, 2012.
STATE OF ALASKA SUSAN L. GUZMAN NOTARY PUBLICA My Comm Exp. W/Differ My Commission Expires: w/ Africa
***************************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

## AFFIDAVIT OF EUGAR & C. GRECKHAL GH/ (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)
1 thought I did it LAST LEAR 19nd did
1 thought I did it LAST LEAR And did
FURTHER AFFIANT SAITH NAUGHT.
Dated at $3-8-12$ , Alaska, this $8$ day of $11$ ARCH, 2012.
SUBSCRIBED AND SWORN TO before me this 7 day of March, 2012.  OFFICIAL SEAL STATE OF ALASKA SUSAN L. GUZMAN NOTARY PUBLIC My Comm. Exp. W. Direct My Commission Expires: w/ Africa
**************************************

R:\Forms\Late File Waiver Affidavit SR & VET.doc

SENIOR CITIZEN EXEMPTION
(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

APPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YE VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

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

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www.borough.kenai.ak.us/assessingdept KPB ASSESSING D
Name: Elizabeth Ann Johnson Assessor's Parcel Number: 174-330-13
Mailing Address: D Box 195 Physical Address: 400 70 Fernwood De
City: Homer AK Zip 99603 Legal Description: T 65 K12W SEC 6 SEW
MOR HAM O FLOOTTO FERNINA
Home Phone:  907-235-8686  Applicants date of birth:  Declared 107 Lo
Cell Phone: Spouses date of birth: パシレ
I am oplying as a:  Senior age 65 and spouse Individual age 65 or older Surviving spouse age 60 or older  Dwelling type:  Single Family Condominium Mobile Home Multi-Family Dwelling Other
What percent of ownership do you alone (or jointly with your spouse) have in this property? / 00 %
Is any portion of this property used for Commercial Purposes? No Yes Rental Purposes? No Yes
Is occupancy shared with someone other than your spouse and/or minor children? No Yes
If yes, when did shared occupancy begin? Date What percent of the home do they occupy? %
If live in care is medically necessary, attach letter from the doctor.
Do you or your spouse own property in another state? No Yes Do you receive any exemptions on that property? No Yes
When traveling outside the state of Alaska, at what address do you primarily reside?  N.A. I rarely can office to travel ousside the state
Did you receive a 2011 Alaska Permanent Fund Dividend? No (Yes)
Will you qualify for a 2012 Alaska Permanent Fund Dividend? No Yes Will you or have you applied? No Yes
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 rigibility to receive the pert five years' exemptions.  Firsteen Ann Domicon  PRINT OR TYPE OWNER NAME  SIGNATURE  DATE
New FilingOccupancy PP AgeDenledApproved Entered by:
Prior FilingOwnership Over Perm FundFullVariableContig

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 reason(s):  Hall sulls that kept me but found
till 29 th 2012 on the late slane
FURTHER AFFIANT SAITH NAUGHT.  Dated at 4 Alth 2012, Alaska, this 7 day of 1000 3011.
SUBSORNETO before me this 7 day of Way (2011, 2012)
SUBSCRIPTO AND SWORM TO before me this day of
******************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

(Senior Citizen or Disabled Veteran Name)

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

SENIOR CITIZEN EXEMPTION
NCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

FLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR 🗄

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

Return completed form and requested information to:

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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

	/			. ~	
Name: GARYW DAIL			per: 0/2-140	<u> </u>	<u>.</u> .
Mailing Address: 50306 I	Flysical A	ddress: <u>څ ک ځ</u>	objected L	KKdKX	15Kg
City: Ke K'91 AK Zip	99611 Legal Des	cription. 7	N R 1260 Se	cll Garage	xd
	500	1690 F	toFE/2 NE	1/4 SE/4 E	FISC
Home Phone:	Applicants date of birth		Spouses name:		RIG
907 776 5117	- 10 4 / 14		K Mada		┤``
Cell Phone: 9077401220		, _	Spouses date of birth:		
I am applying as a:					
Senior age 65 and spouse	☐ Individual age 65 or	older	☐Surviving spouse	age 60 or older	_
Dwelling type:  Single Family  Condomin	ium  Mobile Home	☐ <sub>Multi-Fai</sub>	mily Dwelling Othe	er	
What percent of ownership do you alone	e (or jointly with your spouse) h	nave in this prop	perty? <u>[00</u> %		7
Is any portion of this property used for any	Commercial Purposes?	No Yes	Rental Purposes?	No Yes	7
Is occupancy shared with someone other	er than your spouse and/or min	or children?	No Yes		
If yes, when did shared occupancy begi	n? Date	What percent o	f the home do they occ	upy? %	
If live in care is medically necessary, att					_
Do you or your spouse own property in			any exemptions on that	property? No Yes	s
When traveling outside the state of Alas	ka, at what address do you pri	marily reside?	F don't	TRAVE C	we/
Did you receive a 2011 Alaska Permane	ent Fund Dividend? No Ye				
Will you qualify for a 2012 Alaska Perma	anent Fund Dividend? No	(es) Will you	or have you applied?	No (es)	7
If you answered "No" to any of the PFD ques online).	tions, you must also complete KPE	3 Supplemental F	orm #1(available as the A	ssessing Department of	)r
I CERTIFY: This property is my primary residence prior to each year in which I receive purposes, and is my true and fixed purposes, and is my true and CORRESPONDED TO THE PURPOSE OF THE PRINT OR TYPE OWNER NAME New FilingOccupanceOwnerships	exemption. The property is permanent residence. I here CT to the best of my knowle comption for that year, and (receive the next five years)  SIGN  Age	not used for reby certify that edge. I unders (2) imposition exemptions.	non residential, tempor t the information I am stand that willful misro of a civil fine of up to	orary or vacation or supplying on and epresentation is \$1,000 for each	
Valagai	ues				

# AFFIDAVIT OF PKY W DAILEY (Senior Citizen or Disabled Veteran Name)

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)  House TORN UP QUE TO CONTRACTORS
working had to move Everything Cost paperwork
Started 12/9/11 Just Found Cast Night Putting insulation IN - ceiling in vents - etc
FURTHER AFFIANT SAITH NAUGHT.
Dated at Solofon, Alaska, this 6 day of 74xch, 2012.
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this 6 day of March, 2012.
OFFICIAL SEAL STATE OF ALASKA SUSAN L. GUZMAN NOTARY PUBLIC My Comm. Exp.: Worker My Commission Expires: wforker
*****************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

#### SENIOR CITIZEN EXEMPTION

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)

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

GOMEZ MICHAEL J & CHARLOTTE 353 W KATMAI AVE SOLDOTNA AK 99669-7315 Assessor's Parcel Number: 059-360-37

Physical Address: 353 W KATMAI AVE

Legal Description: T 5N R 10W SEC 30 Seward Meridian KN 0790045

**ROCKFORD SUB LOT 8 BLK 7** 

Home Phone: 907 · 262 - 1203	Applicants date of birth:		Spouses name:	M .
Cell Phone:			Spouses date of bi	irth:
907.394.4651			771 0.	
l am applying as a:				
Senior age 65 and spouse	☐Individual age 65 or old	ler	☐ Surviving spou	ise age 60 or older
Dwelling type:		<u></u>		
Single Family Condominium	n Mobile Home	☐Multi-Famil	ly Dwelling 🔲 C	Other
What percent of ownership do you alone	e (or jointly with your spouse) I	have in this pro	perty?	%
Is any portion of this property used for a	nny Commercial Purposes?	(No) Yes	s Rental Purpos	ses? (No Yes
Is occupancy shared with someone other	er than your spouse and/or mir	nor children?	No Y	⁄es
If yes, when did shared occupancy begi	n? Date	What percent of	of the home do they	occupy? %
If live in care is medically necessary, att	ach letter from the doctor.			
Do you or your spouse own property in Yes	another state? No Yes	Do you receive	any exemptions or	that property? No
When traveling outside the state of Alas	ka, at what address do you pr	imarily reside?		
NA		_		
Did you receive a 2011 Alaska Permane	ent Fund Dividend? No Ye	es		$\bigcirc$
Will you qualify for a 2012 Alaska Perm	anent Fund Dividend? No	Yes Will yo	u or have you appli	ed? No (Yes)
If you answered "No" to any of the PFD question online).	ns, you must also complete KPB Su	pplemental Form	#1(available at the Ass	sessing Department or
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 pext five years' exemptions.				
Michael J. Gomez	Michael	X Jo	mez 3-	6-12
PRINT OR TYPE OWNER NAME	SIGN	ATURE/		DATE
	****ASSESSOR'S U	JSE ONLY **	** 15	M
Occupancy		enied	Approved	Entered by:
Prior Filling Ownership	201 Perm Fund	FullVa	ariableContig	

## AFFIDAVIT OF Michael J. Gomez (Senior Citizen or Disabled Veteran Name)

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
Just found out yesterday there was a date to file by
Vust found out yesterday there was a date to file by We thought we did applied when the tax bill arrived.
FURTHER AFFIANT SAITH NAUGHT.
Dated at GOIDOTNA, Alaska, this day of Karah, 2012.
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this 6 day of, 2012.
STATE OF ALASKA SUSA I. GUZMAN NOT PUBLIC My Commercial My Commission Expires: w/ office
******
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

SENIOR CITIZEN EXEMPTION 2012

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)

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) 2017

Return completed form and requested information to:

Kenai Peninsula Borough Assessor - 144 North Binkley - Soldotna, AK 99669

907	7-714-2230 or 1-800-478-4441 Fax 907 www.borough.kenai.ak.us/assessing	7-714-2393 174 — 1/1-//
Name: Tames Week	Assessor's Parcel Nu	mber: 407 15 Plat # 73-8
Mailing Address: POBCY	976 Physical Address:	USUS Jakes 1. HILFIREW
City: Homer AK Zip	Legal Description:	065
Home Phone:	Applicants date of birth:	Spouses name:
Cell Phone: 299-4254		Spouseş date of birth:
I am applying as a: Senior age 65 and spouse	Individual age 65 or older	Surviving spouse age 60 or older
Dwelling type: Single Family Condomir		Family Dwelling Other
What percent of ownership do you alon	e (or jointly with your spouse) have in this p	roperty? <u>///////</u> %
Is any portion of this property used for any	Commercial Purposes? No Yes	Rental Purposes? No Yes
Is occupancy shared with someone oth	er than your spouse and/or minor children?	(No) Yes
If yes, when did shared occupancy beg	in? Date What percer	nt of the home do they occupy? %
If live in care is medically necessary, at	tach letter from the doctor.	
Do you or your spouse own property in	another state? No Yes Do you receive	ve any exemptions on that property? No Yes
When traveling outside the state of Alas	ska, at what address do you primarily reside	9?
	None	
Did you receive a 2011 Alaska Perman	ent Fund Dividend? No Yes	
Will you qualify for a 2012 Alaska Perm	anent Fund Dividend? No Yes Will y	you or have you applied? No Yes
If you answered "No" to any of the PFD quesonline).	stions, you must also complete KPB Supplementa	al Form #1(available as the Assessing Department or
prior to each year in which I receive purposes, and is my true and fixed with this form is TRUE and CORRE punishable by (1) forfeiture of the each	permanent residence. I hereby certify t CT to the best of my knowledge. I und	or non residential, temporary or vacation that the information I am supplying on and erstand that willful misrepresentation is on of a civil fine of up to \$1,000 for each
James W McLay	Longe III	May 02-17-2012
PRINT OR TYPE OWNER NAME	SIGNATURE	DATE
New Eiling Occurren	****ASSESSOR'S USE ONLY cy AgeDenied	/ **** 5 V TV\ Approved Entered by:
New FilingOccupan		VariableContig
Prior FilingOwnersh	ip	

RECEIVED

FEB 2 ( 2017

KPB ASSESSING DEPT

## AFFIDAVIT OF Control o

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
I that found out that I was able to
APPLY for this Fam to soon old
and to late smart
FURTHER AFFIANT SAITH NAUGHT.
Dated at Homer, Alaska, this 20 day of February, 2012.
(Seníor Citizen and/or Disabled Veteran Signature)  SUBSCRIBED AND SWORN TO before me this 20 day of February, 2012/18/18/18/18/18/18/18/18/18/18/18/18/18/
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

#### SENIOR CITIZEN EXEMPTION

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

ÄPPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE CELLY ED.

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

KPU ASSESSING JEPT

PILCH RODNEY G PO BOX 92 MOOSE PASS AK 99631-0092

Assessor's Parcel Number:

125-130-17

Physical Address: 33482 RANGER STATION SPUR

Legal Description:

T 4N R 1W SEC 25 Seward Meridian SW THAT PORTION OF USS 2497 BEGINNING AT THE SOUTHWEST CORNER OF SAID SURVEY

Home Phone: 907-288-3149	Applicants date of birth:	Spouses name:	
Cell Phone:		Spouses date of birth:	
I am applying as a:			
Senior age 65 and spouse	Individual age 65 or older	☐ Surviving spouse age 60 or older	
Dwelling type: Single Family Condominium	m □Mobile Home □Multi-Fam	ily Dwelling Other	
What percent of ownership do you alon	e (or jointly with your spouse) have in this pr	operty? <u> </u>	
Is any portion of this property used for a	any Commercial Purposes? No Ye	es Rental Purposes? No Yes	
Is occupancy shared with someone other	er than your spouse and/or minor children?	No Yes	
If yes, when did shared occupancy begi	n? Date What percent	of the home do they occupy? $\_$ %	
If live in care is medically necessary, att			
Do you or your spouse own property in Yes	- 1/ 0	e any exemptions on that property? No	
	ka, at what address do you primarily reside	?	
CIRCUS CIRCUS -	LAS VEGAS NEV.	ADA	
Did you receive a 2011 Alaska Permane	ent Fund Dividend? No Yes		
Will you qualify for a 2012 Alaska Permanent Fund Dividend? No Yes Will you or have you applied? No Yes			
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 live years' exemptions.			
Rodney G. Pitch	Hodrey I file	6_ 3-12-2012	
PRINT OR TYPE OWNER NAME	SIGNATURE	DATE	
******* SVM			
New FilingOccupancy	AgeDenied	Approved Entered by:	
Prior FilingOwnership	Perm FundFull	/ariableContig	

AFFIDAVIT OF

(Senior Citizen or Disabled Veteran Name)

RECEIVED

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
I WAS UNAWARE OF A DEADLINE OF FEB 15-th, I THOUGHT the
borough TRAcked my Age & I CALLED THE ASSESMENT OFFICE
immediately AFTER opening my 2012 ASSESSMENT NOTIO THAT LID NOT
inchude my Senger STATUSO
FURTHER AFFIANT SAITH NAUGHT.
Dated at Moose Pass , Alaska, this 13th day of March , 2012.
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN To before me this 12 day of
*******************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

MAR 1 5 2012

KPB ASSESSING DEPT

#### SENIOR CITIZEN EXEMPTION

2013

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

2012

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)

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

DOUGLAS DENNIS PO BOX 39043 NINILCHIK AK 99639-0043 Assessor's Parcel Number: 159-143-22
Physical Address: 69455 RESCH AVE

Legal Description: T 3S R 14W SEC 30 Seward Mendian HM 0970086

PIPERS HAVEN UNIT 2 LOT 3

Home Phone: 937-394-9119 Applicants date of birth Spouses name:	NA
Cell Phone: Same 7	irth:
I am applying as a:  Senior age 65 and spouse Individual age 65 or older Surviving spou	use age 60 or older
Description       Question       Question	Other
What percent of ownership do you alone (or jointly with your spouse) have in this property?	%
is any portion of this property used for any Commercial Purposes? (No Yes Rental Purpos	ses? No Yes
Is occupancy shared with someone other than your spouse and/or minor children?	Yes
If yes, when did shared occupancy begin? Date What percent of the home do they	y occupy?%
If live in care is medically necessary, attach letter from the doctor.	
Do you or your spouse own property in another state? No Yes Do you receive any exemptions or Yes	n that property? No
When traveling outside the state of Alaska, at what address do you primarily reside?	
When traveling outside the state of Alaska, at what address do you primarily reside?	
When traveling outside the state of Alaska, at what address do you primarily reside?  Did you receive a 2012 Alaska Permanent Fund Dividend? No Wes	
	ied? No (Yes)
Did you receive a 2012 Alaska Permanent Fund Dividend? No Res	
Did you receive a 2012 Alaska Permanent Fund Dividend? No Wes Will you or have you appli  If you answered "No" to any of the PFD questions, you must also complete KPB Supplemental Form #1(available at the Ass	sessing Department or  ccupy it for a d for non residential, ify that the information understand that willful ition of a civil fine of

AFFIDAVIT OF	DENALIS		Doughs
	(Senior Citizen or Disa	bled Vet	eran Name
AND APPLICAT	TION FOR APPRO	VAL O	F LATE FILING
EOD SENIOD C	ITIZEN ANDIOD D	ICADI	ED VETEDAN

spouses thereof.
Failure to meet the filing deadline is based on the following reason(s):
WAS TOLD LAST ZIEAR THAT hAD TO WAIT UNITED
APRIL 12 12 to apply Tollock again March 5 12
* RETURNED W/ BIRTH CERRYIFICATE 3/15/12.
FURTHER AFFIANT SAITH NAUGHT.
Dated at Huwaz, Alaska, this 15th day of MARCH, 2012
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND TO before me this 15th day of
**************************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

SENIOR CITIZEN EXEMPTION

2012

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR DUE ON OR BEFORE FEBRUARY 131M OF THE EARING TEAR.

PLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION)

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

MAR 1 9 2012

KPB ASSESSING DEPT

MARTIN JOHN L & DONNA S PO BOX 3283 HOMER AK 99603-3283

Assessor's Parcel Number: 174-170-13

Physical Address: 41365 PTARMIGAN HEIGHTS DR

Legal Description: T 6S R 13W SEC 11 Seward Meridian HM 0731019 BIRCH SIDE ACRES SUB UNIT 3 LOT 5 BLK 5

Home Phone:	Applicants date of high	Spouses name:	
(907) 235-6348		Denna S. Martin	
Cell Phone: (907) 299-1743		Spouses date of birth:	
I am applying as a:			
Senior age 65 and spouse	☐ Individual age 65 or older	☐ Surviving spouse age 60 or older	
Dwelling type:			
Single Family Condominium	mMobile HomeMulti-Fam	ily Dwelling Other	
What percent of ownership do you alon-	e (or jointly with your spouse) have in this pr	roperty? 100 %	
Is any portion of this property used for a	any Commercial Purposes? No Ye	es Rental Purposes? No Yes	
Is occupancy shared with someone other	er than your spouse and/or minor children?	No Yes	
If yes, when did shared occupancy begi	n? Date What percent	of the home do they occupy? %	
If live in care is medically necessary, att	ach letter from the doctor.	_	
Do you or your spouse own property in Yes	another state? No Yes Do you receiv	e any exemptions on that property? No	
When traveling outside the state of Alas	ska, at what address do you primarily reside	?	
Rockhill Road .la	cksum OH 45-640		
Did you receive a 2011 Alaska Permane	ent Fund Dividend? No (Yes)		
Will you qualify for a 2012 Alaska Perm	anent Fund Dividend? No Yes Will y	ou or have you applied? No Yes	
If you answered "No" to any of the PFD questionline).	ons, you must also complete KPB Supplemental For	n #1(available at the Assessing Department or	
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.			
John L. Martin	Joh L. Martin	3/20/12	
PRINT OR TYPE OWNER NAME	SIGNATURE	, bate	
	****ASSESSOR'S USE ONLY *	*** 5VM	
New FilingOccupancy	AgeDenied _	Approved Entered by:	
Prior FilingOwnership	Perm FundFull	VariableContig	

# AFFIDAVIT OF John L. Martin (Senior Citizen or Disabled Veteran Name) AND APPLICATION FOR APPROVAL OF LATE FILING FOR SENIOR CITIZEN AND/OR DISABLED VETERAN

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
was not aware that exemption existed until it come up
was not aware that exemption existed until it come up in conversation at a St. Patrick's Day party.
FURTHER AFFIANT SAITH NAUGHT.  Dated at Homer, Alaska, this 19th day of March, 2012.  Senior Citizen and/or Disabled Veteran Signature)  SUBSCRIBED AND SWORN TO before me this 19th day of March, 2012.  NOTARY PUBLIC ANDREW JOHANNES
STATE OF ALASKA  Notary Public, State of Alaska  My Commission Expires: 1966. 15, 2015
********************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

#### **HEUEIVEU**

MAR 1 3 2012

(PB ASSESSING DEPT 2012

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)

DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR ECEIVED

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) 1 3 2012

Return completed form and requested information to:

Kenai Peninsula Borough Assessor - 144 North Binkley - Soldotna, AK 9966 PB ASSESSING DEPT 907-714-2230 or 1-800-478-4441 Fax 907-714-2393 www.borough.kenai.ak.us/assessingdept

Name: ANDREW N. BAKKE Assessor's Parcel Number: Physical Address: Mailing Address: Box 3/62 AK AK Zip 99603 Legal Description: Tips City: HOMER HM OBCOOSE DiAma Home Phone: Applicants date of birth: Spouses name: 907 235 1052 12ANNE Cell Phone: Spouses date of hirth 907 l am applying as a: Surviving spouse age 60 or older Senior age 65 and spouse dividual age 65 or older Dwelling type: Mobile Home Multi-Family Dwelling Single Family Condominium Other What percent of ownership do you alone (or jointly with your spouse) have in this property? 100 Is any portion of this property used for Commercial Purposes? (Ng Rental Purposes? (NO) Yes Is occupancy shared with someone other than your spouse and/or minor children? (NO) \_ What percent of the home do they occupy? \_ If yes, when did shared occupancy begin? Date\_ If live in care is medically necessary, attach letter from the doctor. Do you or your spouse own property in another state? (No) Yes Do you receive any exemptions on that property? No Yes When traveling outside the state of Alaska, at what address do you primarily reside? Yes Did you receive a 2010 Alaska Permanent Fund Dividend? No No (Pes) Will you qualify for a 2011 Alaska Permanent Fund Dividend? Will you or have you applied? If you answered "No" to any of the PFD questions, you must also complete KPB Supplemental Form #1(available as the Assessing Department or online). 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. PRINT OR TYPE OWNER NAME ASSESSOR'S USE ONLY \*\*\*\* New Filing Occupancy Denled Entered by: 20 Prior Filing Ownership Perm Fund

# AFFIDAVIT OF ANDREW N. BAKKE (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 <u>A.S. 29.45.030 Required Exemptions and KPB Code</u> <u>5.12.105. Real Property Tax-Exemptions - Senior Citizens, Disabled Veterans and surviving spouses thereof.</u>

Failure to meet the filing deadline is based on the following reason(s):
Ded not know I was speaking with
my friend and was told about the exemption last.
And not known I was speaking with my friend and was told about the exemption last. week for the first time.
FURTHER AFFIANT SAITH NAUGHT.  Dated at 10MER, Alaska, this 69 day of MARCH ,2012,2011.
Dated at, Alaska, this, day of
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBERAND SWOWN TO before me this Oq day of WARCH , 2011 Com
Notary Public, State of Alaska My Commission Expires: 01/11/2016
**************************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

R'IForms\Late File Waiver Affidavit SR & VET.doc (Revised 2-2008)

ENIOR CITIZEN EXEMPTION

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR
PPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION)

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

**APB ASSESSING DEPT** 

MARISME

WANKA VANCEARK BANIC ANEA

PO BOX 633 SEWARD AK 99664-0633

ź,

Assessor's Parcel Number:

145-180-27

Physical Address:

1804 JESSE LEE DR

Legal Description:

T 1N R 1W SEC 34 Seward Meridian SW 0000050

JESSE LEE HEIGHTS SUB LOT 27 BLK 3

I I am a Dia am a	Applicants data of high	Chausa nama:
Home Phone:	Applicants date of birth:	Spouses name:
907-224-3043		
Cell Phone:		Spouses date of birth:
l am applying as a:		
Senior age 65 and spouse	Individual age 65 or older	Surviving spouse age 60 or older
Dwelling type:		
Single Family Condomin	ium LJMobile Home LJ	Multi-Family Dwelling Uother
What percent of ownership do you al	one (or jointly with your spouse) have	e in this property?%
Is any portion of this property used for	r any Commercial Purposes?	No Yes Rental Purposes? No Yes
Is occupancy shared with someone of	ther than your spouse and/or minor	children? No Yes
If yes, when did shared occupancy be	egin? Date Wh	at percent of the home do they occupy? %
If live in care is medically necessary,		
Do you or your spouse own property Yes	in another state? (No) Yes Do	you receive any exemptions on that property? (No
When traveling outside the state of A	laska, at what address do you prima	rily reside?
Did you receive a 2011 Alaska Perma	anent Fund Dividend? No (Yes)	
Will you qualify for a 2012 Alaska Pe	rmanent Fund Dividend? No Yes	Will you or have you applied? No Yes
If you answered "No" to any of the PFD que online).	stions, you must also complete KPB Supple	mental Form #1(available at the Assessing Department or
minimum of 185 days prior to each temporary or vacation purposes, a lam supplying on and with this for	h year in which I receive exempti and is my true and fixed permane rm is TRUE and CORRECT to the y (1) forfeiture of the exemption f	ent place of abode. I will occupy it for a on. The property is not used for non residential, nt residence. I hereby certify that the information e best of my knowledge. I understand that willful or that year, and (2) imposition of a civil fine of the next five years' exemptions.
ANKA BAL	vić anko	BANIC ORNU-17
PRINT OR TYPE OWNER NAME		Banic 03-14-12  DATE  SVW
	****ASSESSOR'S USE	E ONLY ****
New Filing Occupa	$\Omega$	
		Full 50% Variable Contig
Prior FilingOwners	iip COLA Perm Fund	ruii variable Contig

AFFIDAVIT OF	Anka	Bar	· \\C	_
AND APPLICAT	(Senior Citizen of CION FOR AP	or Disabled Vet PROVAL O	eran Name) F LATE FILIN	Ġ
FOR SENIOR C	ITIZEN AND	OR DISABL	ED VETERAN	

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause) My daughter and I hard together for few Years. And man
that she moved aut of State live alone and due to my lack of
understanding language and not eable to read or write, I didn't know about
this. My daugter in law Tust fount out all this information for me cano
this. My designation in law Just fount out all this information for me conc with truth and honesty that why I am late. I would never know it FURTHER AFFIANT SAITH NAUGHT.
Dated at Sewand , Alaska, this 14 day of Morch , 2012.
SUBSCRIBED AND SWOOTH TO before me this 41 day of March , 2012.    Annumaria Miliamed Notary Public, State of Alaska My Commission Expires: 9.30-13
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

ATE FILER

11/30/90

#### **SENIOR CITIZEN EXEMPTION**

2012

MAR 7

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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 CETTED

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

2012 KOR ASSESSING DEPT

	www.borough.kenai.ak.us/assessingde	ept ADDEDDING DI
Name: JAMES MA	Assessor's Parcel Numl	oer: <u>185503</u> 27
Mailing Address: POBEX 3	7736 Physical Address: 52	2072 SETTLE ABE
City: NILCHIKAK Zip	99639 Legal Description: 71	SRIZW SEC 25 SEWARL
		-PW SE14 NE14 SE14
Home Phone: 907-252-110/	Applicants date of birth: /	Spouses name:
Cell Phone: 907-252-1101	,	Spouses date of birth:
I am applying as a: ☐Senior age 65 and spouse	☑Individual age 65 or older	Surviving spouse age 60 or older
Dwelling type: Single Family Condomini	ium D <sub>Mobile Home</sub> D <sub>Multi-Fa</sub>	mily Dwelling Other
What percent of ownership do you alone	e (or jointly with your spouse) have in this prop	perty? <u>/ 20</u> %
Is any portion of this property used for any	Commercial Purposes? No Yes	Rental Purposes? No Yes
Is occupancy shared with someone othe	er than your spouse and/or minor children?	No Yes
If yes, when did shared occupancy begin	n? Date What percent of	of the home do they occupy?%
If live in care is medically necessary, att	ach letter from the doctor.	
Do you or your spouse own property in a	another state? No Yes Do you receive	any exemptions on that property? No Yes
When traveling outside the state of Alas	ka, at what address do you primarily reside?	
Did you receive a 2011 Alaska Permane	(5)	
-		u or have you applied? No Yes
Will you qualify for a 2012 Alaska Perma If you answered "No" to any of the PFD quest online).	tions, you must also complete KPB Supplemental F	
I CERTIFY: This property is my primary residence prior to each year in which I receive purposes, and is my true and fixed put with this form is TRUE and CORRECT punishable by (1) forfeiture of the expenses.	ce and permanent place of abode. I will dexemption. The property is not used for permanent residence. I hereby certify the CT to the best of my knowledge. I understemption for that year, and (2) imposition receive the next first years' exemptions.  SIGNATURE  **** ASSESSOR'S USE ONLY ***	non residential, temporary or vacation at the information I am supplying on and stand that willful misrepresentation is of a civil fine of up to \$1,000 for each  DATE
New FilingOccupand		Approved Entered by:
Prior FilingOwnership	p <u> </u>	_VariableContig

RECEN	/ED
AFFIDAVIT OF THE SEMENT TO THE	JEF7
This Application is made Pursuant to <u>A.S. 29.45.030 Required Exemptions</u> and <u>KPB Code 5.12.10 Real Property Tax-Exemptions</u> - <u>Senior Citizens</u> , <u>Disabled Veterans and surviving spouses there</u>	<u>)5.</u> :of.
f good cause) Filing deadline is based on the following good cause: (see reverse for deaf good cause) Filiport KNOW IT WAS DUE 2/15 AND	finition
SINCE I LIVE IN THE CARIBON HILLS IT IS DIFI	FICHCT
TO GET TO THE P.O. & I COULDN'T GET IN MI	UED
ON TIME, A FRAND MAILED IT FOR ME BUT	LATE
Dated at SOLDSTUA, Alaska, this 13 day of MARCH, 2012.  (Serior Citizen and/or Disabled Veteran Signature)	
OFFICIAL SEAL MOLLY GREEN NOTA RY PUBLIC-STATE OF ALASKA My Comm. Expires 9/29/2012  My Comm. Expires 9/29/2012	
**************************************	:* <del></del>
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Office).	e Mayor's
ASSEMBLY ACTION: APPROVAL DENIAL	

SENIOR CITIZEN EXEMPTION

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)

DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

ARPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE).

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

COLLINS DAVID H & SHERRY L PO BOX 68 KASILOF AK 99610-0068

Assessor's Parcel Number:

137-321-28

Physical Address: 20969 TUSTUMENA LAKE RD

Legal Description:

T 2N R 11W SEC 7 Seward Meridian KN NE1/4 NE1/4 EXCEPTING THEREFROM THE TUSTAMENA LAKE

ROAD ROW

Home Phone:	Applicants date of hirth	Spouses name:
907-262-4959	·,	Sherry Collins
Cell Phone:		Spouses date of birth:
907-394-2966		
I am applying as a:		
Senior age 65 and spouse	☐ Individual age 65 or older	Surviving spouse age 60 or older
Dwelling type:		
Single Family Condominium	m	Multi-Family Dwelling Other
What percent of ownership do you alone (or jointly with your spouse) have in this property? 100 %		
Is any portion of this property used for a	any Commercial Purposes? (	No Yes Rental Purposes? No Yes
Is occupancy shared with someone other	er than your spouse and/or minor o	children? Yes
If yes, when did shared occupancy begi	n? Date Wha	at percent of the home do they occupy?%
If live in care is medically necessary, att	ach letter from the doctor.	
Do you or your spouse own property in Yes	another state? No Yes Do y	you receive any exemptions on that property? (No
When traveling outside the state of Alas	ka, at what address do you primar	rily reside?
Seldom travels has	se no Other addn	sos
Did you receive a 2011 Alaska Permane		
Will you qualify for a 2012 Alaska Perm	anent Fund Dividend? No Yes	) Will you or have you applied? No Yes
If you answered "No" to any of the PFD questic online).	ns, you must also complete KPB Supple	mental Form #1(available at the Assessing Department or
minimum of 185 days prior to each y temporary or vacation purposes, and I am supplying on and with this form	year in which I receive exemption  I is my true and fixed permaner  Is TRUE and CORRECT to the  1) forfeiture of the exemption for	11 ( 11)
PRINT OR TYPE OWNER NAME	SIGNATU	IRF DATE
The second section of the second section secti	to the Atlantic Policy and Atlantic Atl	IRE DATE  SONLY ****
	****ASSESSOR'S USE	ONLY **** SW
New FilingOccupancy	Denied	
Prior FilingOwnership	2 <u>012/</u> Perm Fund	FullVariableContig

AFFIDAVIT OF DAVID H. COLLINS

(Senior Citizen or Disabled Veteran Name)

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
Did Not Realize then was a deadline. Just recently
Lound out about the exemption.
FURTHER AFFIANT SAITH NAUGHT.
Dated at, Alaska, this <u>/</u> day of <u>3</u> , 2012.
SUBSCRIBED AND SWORN TO before me this day of March, 2012.  NOTARY PUBLIC Notary Public, State of Alaska My Commission Expires: 9/10/15
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

#### SENIOR CITIZEN EXEMPTION

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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)

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

REICHERT JOHN M & LINDA K 37335 BIRCH RIDGE ST STERLING AK 99672-9605

Assessor's Parcel Number:

063-550-47

Physical Address: 37335 BIRCH RIDGE ST

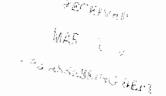
Legal Description: T 5N R 9W SEC 17 Seward Meridian KN 0770081

HOMEWOOD SUB LOT 5 BLK 9

Home Phone: 707-262-1861	Applicants date of birth	Spouses name: Linda Rewlort	
Cell Phone:		Spouses date of birth:	
I am applying as a:	l	-, , , , , +	
Senior age 65 and spouse	☐Individual age 65 or olde	er Surviving spouse age 60 or older	
Dwelling type:	<u></u>		
Single Family Condominium	m	☐Multi-Family Dwelling ☐Other	
What percent of ownership do you alon	e (or jointly with your spouse) h	ave in this property?	
Is any portion of this property used for a	Is any portion of this property used for any Commercial Purposes? No Yes Rental Purposes? Yes		
Is occupancy shared with someone other	er than your spouse and/or mine	or children? (No) Yes	
If yes, when did shared occupancy begi	n? Date V	Vhat percent of the home do they occupy? %	
If live in care is medically necessary, att			
Do you or your spouse own property in Yes	another state? (No) Yes D	o you receive any exemptions on that property? No	
When traveling outside the state of Alas	ska, at what address do you prir	narily reside?	
37335 Birch Ridge	St. Sterling	AK 99672	
Did you receive a 2011 Alaska Permane	ent Fund Dividend? No <b>W</b> e	3)	
Will you qualify for a 2012 Alaska Perm	anent Fund Dividend? No	es Will you or have you applied? No (Yes)	
If you answered "No" to any of the PFD question online).	ons, you must also complete KPB Sup	plemental Form #1(available at the Assessing Department or	
minimum of 185 days prior to each temporary or vacation purposes, and am supplying on and with this form	year in which I receive exem d is my true and fixed perma is TRUE and CORRECT to 1) forfeiture of the exemption	anent place of abode. I will occupy it for a ption. The property is not used for non residential, nent residence. I hereby certify that the information the best of my knowledge. I understand that willful n for that year, and (2) imposition of a civil fine of the next five years' exemptions.	
John M. Reicher	t Ale (x	eight: 3-1-12	
PRINT OR TYPE OWNER NAME	SIGNA	TURE DATE	
	****ASSESSOR'S U	SE ONLY **** SV W	
New FilingOccupancy	AgeDe	niedApproved Entered by:	
Prior FilingOwnership	2 <u>01</u> 2 Perm Fund _	FullVariableContig	

## AFFIDAVITOF John M. Keich

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) aware of Filing deadling date IN as FURTHER AFFIANT SAITH NAUGHT. Dated at Soldat Na, Alaska, this 1 day of March, 2012. SUBSCRIBED AND SWORN TO before me this 1 day of 1 OFFICIAL SEAL Notary Public, State of Alaska My Commission Expires: W/ office

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

APPROVAL

**ASSEMBLY ACTION:** 

Office).

#### 2012 ÉICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR 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 Assessor's Parcel Number: tat mullan Physical Address: 287 w. Rodaust and Mailing Address: POBOX 4244 AK Zip Block Home Phone: Applicants date of birth: Spouses name: laura Mullan 262-9456 Shouses date of hirth: Cell Phone: 252-8082 am applying as a: Surviving spouse age 60 or older Senior age 65 and spouse ☐Individual age 65 or older Dwelling type: Mobile Home Multi-Family Dwelling Other Single Family Condominium What percent of ownership do you alone (or jointly with your spouse) have in this property? 100 % Is any portion of this property used for Commercial Purposes? (No) (No) Yes **Rental Purposes?** Yes (ND) Is occupancy shared with someone other than your spouse and/or minor children? Yes What percent of the home do they occupy? If yes, when did shared occupancy begin? Date If live in care is medically necessary, attach letter from the doctor. Do you receive any exemptions on that property? No Yes Do you or your spouse own property in another state? (No) Yes When traveling outside the state of Alaska, at what address do you primarily reside? (Yes Did you receive a 2011 Alaska Permanent Fund Dividend? No (Yes Will you qualify for a 2012 Alaska Permanent Fund Dividend? (Yes Will you or have you applied? No If you answered "No" to any of the PFD questions, you must also complete KPB Supplemental Form #1(available as 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.

Pot mullan Jr.	Gat Milla V.	2.28.12
PRINT OR TYPE OWNER NAME	SIGNATURE	DATE
New FilingOccupand	2012	S N Entered by: Contig

## AFFIDAVIT OF Pet mullen Ji. (Senior Citizen or Disabled Veteran Name)



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

real Property Tax-Exemptions - Semior Citizens, Disabled Veterans and Surviving spouses thereor.
Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
unaware of the program
· ·
FURTHER AFFIANT SAITH NAUGHT.
Dated at Soldens, Alaska, this 28th-day of Telousy, 2012.
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this day of Telmon, 2012.
Notary Public TIANA SIMPSON State of Alaska My Commission Expires Feb 14, 2014  Notary Public, State of Alaska My Commission Expires: Feb it 2014
***********************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

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Cell Phone 907 - 399 - 4300  I am applying as a Senior age 65 and spouse Individual age 65 or older Surviving spouse age 60 or older  Dwelling type.  Wisingle Family Condominium Mobile Home Multi-Family Dwelling Other  What percent of ownership do you alone (or jointly with your spouse) have in this property?  Is any portion of this property used for Commercial Purposes?  No Yes Rental Purposes?  No Yes  If yes, when did shared occupancy begin? Date What percent of the home do they occupy?  If live in care is medically necessary, attach letter from the doctor  Do you or your spouse own property in another state? No Yes Do you receive any exemptions on that property?  When traveling outside the state of Alaska, at what address do you primarily reside?	Cerron Davis   Cerron Davis   Spouses date of birth	Homer AK = 9	9603 Lega Desiror	T 65 R 14W Sec 9 Seward	Meridian
Cell Phone 907 - 399 - 4300  I am applying as a Senior age 65 and spouse Individual age 65 or older Surviving spouse age 60 or older  Dwelling type.  Wisingle Family Condominium Mobile Home Multi-Family Dwelling Other  What percent of ownership do you alone (or jointly with your spouse) have in this property?  Is any portion of this property used for Commercial Purposes?  No Yes Rental Purposes?  No Yes  If yes, when did shared occupancy begin? Date What percent of the home do they occupy?  If live in care is medically necessary, attach letter from the doctor  Do you or your spouse own property in another state? No Yes Do you receive any exemptions on that property?  When traveling outside the state of Alaska, at what address do you primarily reside?	Cerron Davis   Cerron Davis   Spouses date of birth		and the second s	LOT 18 BIK	(n./7
Spouses date of bith   Spouses date of bith	am applying as a Senior age 65 and spouse   Individual age 65 or older   Surviving spouse age 60 or older   Dwelling type. Single Family   Condominium   Mobile Home   Multi-Family Dwelling   Other   What percent of ownership do you alone (or jointly with your spouse) have in this property?   100   %   Is any portion of this property used for   Commercial Purposes?   No   Yes   Rental Purposes?   No   Yes   If yes, when did shared occupancy begin? Date   What percent of the home do they occupy?   ° %   If live in care is medically necessary, attach letter from the doctor   Do you or your spouse own property in another state?   No   Yes   Do you receive any exemptions on that property?   No   If you answered "No" to any of the PFD questions you must also complete KPB Supplemental Form #1 available at the Assessing Department or		or pants date of perf		
I am applying as a Senior age 65 and spouse Individual age 65 or older Surviving spouse age 60 or older  Dwelling type.  Single Family Condominium Mobile Home Multi-Family Dwelling Other  What percent of ownership do you alone (or jointly with your spouse) have in this property? //w %  Is any portion of this property used for Commercial Purposes? No Yes Rental Purposes? No Yes any  Is occupancy shared with someone other than your spouse and/or minor children? No Yes  If yes, when did shared occupancy begin? Date What percent of the home do they occupy? **  If live in care is medically necessary, attach letter from the doctor  Do you or your spouse own property in another state? No Yes Do you receive any exemptions on that property? No Yes  When traveling outside the state of Alaska, at what address do you primarily reside?	am applying as a Senior age 65 and spouse				3
Senior age 65 and spouse   Individual age 65 or older   Surviving spouse age 60 or older    Dwelling type.   Single Family   Condominium   Mobile Home   Multi-Family Dwelling   Other	Senior age 65 and spouse   Individual age 65 or older   Surviving spouse age 60 or older				
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What percent of ownership do you alone (or jointly with your spouse) have in this property?	Mobile Home   Multi-Family Dwelling   Other    What percent of ownership do you alone (or jointly with your spouse) have in this property?	The state of the s	Lindividual age 55 or older	Li Sarviving spouse age 50	or order
What percent of ownership do you alone (or jointly with your spouse) have in this property?	What percent of ownership do you alone (or jointly with your spouse) have in this property?		n	Multi-Family Dwelling Other	
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	f you answered "No" to any of the PFD questions: you must also complete KPB Supplemental Form #1(available at the Assessing Department or	Did you receive a 2011 Alaska Permanent	Fund Dividend? No Yes		
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I CERTIFY: This property is my primary residence and permanent place of abode. I will occupy it for a	This property is my primary residence and permanent place or assess. This ecoupy it for a	temporary or vacation purposes, and i	s my true and fixed permanent	residence. I hereby certify that the	e information
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	minimum of 185 days prior to each year in which I receive exemption. The property is not used for non residential emporary or vacation purposes, and is my true and fixed permanent residence. I hereby certify that the information				
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	minimum of 185 days prior to each year in which I receive exemption. The property is not used for non residential emporary or vacation purposes, and is my true and fixed permanent residence. I hereby certify that the information am supplying on and with this form is TRUE and CORRECT to the best of my knowledge. I understand that willful				
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	minimum of 185 days prior to each year in which I receive exemption. The property is not used for non residential emporary or vacation purposes, and is my true and fixed permanent residence. I hereby certify that the information 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	Paul Washy Name	Da. O wanden Davin	3/28/10	7/2
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.	minimum of 185 days prior to each year in which I receive exemption. The property is not used for non residential emporary or vacation purposes, and is my true and fixed permanent residence. I hereby certify that the information 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.	PRINT OR TYPE OWNER NAME	Paul Wesley Down	5/20/20	<del>,</del>



MAR 3 0 2012

KPB ASSESSING DEPT

## AFFIDAVIT OF Paul Wesley Downs Sence Of sen or Disabled Lettran Name; AND APPLICATION FOR APPROVAL OF LATE FILING FOR SENIOR CITIZEN AND/OR DISABLED VETERAN

e Property Tay Eyemptong in Sentity Property Disabled Weterand ynd diwyddiaith i seditife eu t
ailure to meet the filing deadline is based on the following good cause: (see reverse for definition f good cause) $M_{\gamma}$ . Wife is on the lung transplant list at Univ. of Wash and
we have to reside here until the transplant happens and at least three
months longer we have here since June 25, 2011
·
FURTHER AFFIANT SAITH NAUGHT.
Dated at Seattle, WA Alaska, this 28th day of March . 2012.
Paul Wasky Wavs  (Senior Citizen and or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this 28th day of March, 2012.
JOSEPH YOUNG KWANG LEE
Notary Public State of Washington My Commission Expires  Notary Public, State of History Washington
September 5, 2012  My Commission Expires: Sept. 5th 2012
***********************
Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office)
ASSEMBLY ACTION: APPROVAL DENIAL
ACCUMBET ACTION. AT THOUSE

**SENIOR CITIZEN EXEMPTION** 

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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)

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

Applicants date of birth:

RECEIVED

MAR 29 2012

KPB ASSESSING DEPT

THOMPSON DAVID & DONNA PO BOX 1615 SEWARD AK 99664-1615

Home Phone:

Assessor's Parcel Number:

148-040-08

Physical Address:

103 MADISON ST

Spouses name:

Legal Description:

T 1S R 1W SEC 10 Seward MERIDIAN SW 0000001

ORIGINAL TOWNSITE OF SEWARD LOT 38 THRU

40 BLOCK 26

1987) 009-5012		LANNE
Cell Phone: (907) 491-3424		Spouses date of birth:
l am applying as a:		
Senior age 65 and spouse	☐Individual age 65 or older	☐ Surviving spouse age 60 or older
Dwelling type:		
Single Family Condominium Mobile Home Multi-Family Dwelling Other		
What percent of ownership do you alone	e (or jointly with your spouse) have in th	is property?%
Is any portion of this property used for a	nny Commercial Purposes? No	Yes Rental Purposes? (Vo Yes
Is occupancy shared with someone other	er than your spouse and/or minor childre	en? No Yes
If yes, when did shared occupancy begin	n? Date What per	cent of the home do they occupy? %
If live in care is medically necessary, atta	ach letter from the doctor.	
Do you or your spouse own property in Yes	another state? (No) Yes Do you re	ceive any exemptions on that property? No
When traveling outside the state of Alas	ka, at what address do you primarily re	side?
		*
Did you receive a 2011 Alaska Permane	ent Fund Dividend? No Yes	
Will you qualify for a 2012 Alaska Perm		/ill you or have you applied? No Yes
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).		
minimum of 185 days prior to each y temporary or vacation purposes, and I am supplying on and with this form misrepresentation is punishable by (	d is my true and fixed permanent res is TRUE and CORRECT to the bes	he property is not used for non residential, sidence. I hereby certify that the information t of my knowledge. I understand that willful it year, and (2) imposition of a civil fine of
Danna Size Thompson PRINT OR TYPE OWNER NAME	SIGNATURE	3/29/12 DATE
,	****ASSESSOR'S USE ONI	<u>y****</u> 5mV
New FilingOccupancy	2/	Approved Entered by:
Prior FilingOwnership	2012 1 Perm FundFull _	VariableContig

## AFFIDAVIT OF Denna Sue Thompson (Senior Citizen or Disabled Veteran Name)

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
She had a Stroke. Heavily involved in medical.
She had a Stroke, Heavily involved in medical.  Husband had cardio endocripitus. = heart infection.
FURTHER AFFIANT SAITH NAUGHT.
Dated at <u>Seward</u> , Alaska, this <u>29</u> day of <u>March</u> , 2012.
(Senior Citizen and/or Disabled Veteran Signature)  SUBSCRIBED AND SWORN TO before me this 29 day of
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

#### SENIOR CITIZEN EXEMPTION

NCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR APPLICATION OF ACCUMENT ACCUMENTS ASSESSED TO THE EXEMPTION YEAR

VERIFICATION OF ACCUMENT ACCUMENTS. VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

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

RECEIVED

BENDTZEN DENA & BLACK NOEL 4. PO BOX 39491 NINILCHIK AK 99639-0491

Assessor's Parcel Number:

159-300-17

KPB ASSESSING DEPT

Physical Address: 65785 OIL WELL RD

Legal Description: T 2S R 14W SEC 2 Seward Meridian HM 0750019 SPAKIONAYA VISOK SUB LOT 17 BLK 1

Home Phone:	Applicants date of birth:	Spouses name:
10 00 100	907-567-3201	
Cell Phone: Applicants Social Security Number:		Spouses date of birth:
I am applying as a:		
Senior age 65 and spouse	☑individual age 65 or older	☐ Surviving spouse age 60 or older
Dwelling type:		
☐ Single Family ☐ Condominium ☐ Mobile Home ☒ Multi-Family Dwelling ☐ Other		
What percent of ownership do you alone (or jointly with your spouse) have in this property?5%		
Is any portion of this property used for	any Commercial Purposes? (No) Yo	es Rental Purposes? No Yes
Is occupancy shared with someone oth	er than your spouse and/or minor children?	No Yes
If yes, when did shared occupancy beg	in? Date Sept 2000 What percent	of the home do they occupy? 50 %
If live in care is medically necessary, att	•	
Do you or your spouse own property in Yes	another state? No Yes Do you receiv	e any exemptions on that property? No
When traveling outside the state of Ala	ska, at what address do you primarily reside	?
Don't travel		
Did you receive a 2011 Alaska Perman	ent Fund Dividend? No Yes	
Will you qualify for a 2012 Alaska Permanent Fund Dividend? No (Yes) Will you or have you applied? No (Yes)		
If you answered "No" to any of the PFD questionline).	ons, you must also complete KPB Supplemental For	n #1(available at the Assessing Department or
minimum of 185 days prior to each temporary or vacation purposes, an I am supplying on and with this form misrepresentation is punishable by	primary residence and permanent place year in which I receive exemption. The place is my true and fixed permanent reside in is TRUE and CORRECT to the best of (1) forfeiture of the exemption for that yee (3) loss of eligibility to receive the next	property is not used for non residential, nce. I hereby certify that the information my knowledge. I understand that willful ear, and (2) imposition of a civil fine of
Noel Block	Mul Blace	4 3-22-19
PRINT OR TYPE OWNER NAME	SIGNATURE	DATE
	****ASSESSOR'S USE ONLY	*** SVM
New FilingOccupanc	2/1	Approved Entered by:
Prior FilingOwnership	2017 Perm FundFull	VariableContig

## AFFIDAVIT OF Nel Howard Black (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) FURTHER AFFIANT SAITH NAUGHT. Dated at Minilchik, Alaska, this 22 day of March, 2012. (Senior Citizen and/or Disabled Veteran Signature) LINDA C. PAINTER Notary Public, State of Alaska **NOTARY PUBLIC** My Commission Expires: 8-5-/3(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).

APPROVAL

ASSEMBLY ACTION:

#### SENIOR CITIZEN EXEMPTION

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)

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 CEIVED

(	Return completed form and requested inform Kenai Peninsula Borough Assessor - 144 North Birikley	- Soldotna, AK 99669 MAR 3 0 ZUIZ	
6	907-714-2230 or 1-800-478-4441 Fax 907- www.borough.kenai.ak.us/assessingd	-714-2393	EPT
	REBECCA SCOTT ABBOTT LUNDQVIST  Assessor's Parcel Num	nber: 193-300-12	
	PO BOX 2675 HOMER AK 99603-2675 W. Findlay Physical Address: 52	2370 YUKON ISLAND REM SW	
	Din 2 2 (H66011 Legal Description: 18	3S R 13W SEC 3 & 4 Seward Meridian SL 0001507 S SURVEY 1507 EXCL N 100 FT OF E 435 FT JKON ISLAND	
	Home Phone: Applicants date of birth: Applicants date of birth:	Spouses name:	
	Cell Phone:	Spouses date of birth:	
•	I am applying as a: Senior age 65 and spouse Individual age 65 or older	Surviving spouse age 60 or older	
	Dwelling type:  ☐Single Family ☐Condominium ☐Mobile Home ☐Multi-Fam	mily Dwelling Other <u>Cabin</u>	
	What percent of ownership do you alone ( <del>or jointly with your spouse)</del> have in this p	property? <u>/6,6</u> % ( )/6 )	
	Is any portion of this property used for any Commercial Purposes? (No Y	es Rental Purposes? (NO Yes	
	Is occupancy shared with someone other than your spouse and/or minor children?	No Yes	
	If yes, when did shared occupancy begin? Date What percent	at of the home do they occupy?%	
	If live in care is medically necessary, attach letter from the doctor.		
		ve any exemptions on that property? No	
	When traveling outside the state of Alaska, at what address do you primarily reside	e?	
	hone		
	Did you receive a 2011 Alaska Permanent Fund Dividend? No Yes		
	Will you qualify for a 2012 Alaska Permanent Fund Dividend? No Yes Will y	you or have you applied? No Yes	
	If you answered "No" to any of the PFD questions, you must also complete KPB Supplemental For online).	rm #1(available at the Assessing Department or	
	i CERTIFY: This property is my primary residence and permanent place minimum of 185 days prior to each year in which I receive exemption. The ptemporary or vacation purposes, and is my true and fixed permanent reside I am supplying on and with this form is TRUE and CORRECT to the best of misrepresentation is punishable by (1) forfeiture of the exemption for that ye up to \$1,000 for each violation: and (3) loss of eligibility to receive the next W.F. Indlay Abboth W. Tudlay	property is not used for non residential, ence. I hereby certify that the information f my knowledge. I understand that willful ear, and (2) imposition of a civil fine of	
	PRINT OR TYPE OWNER NAME SIGNATURE	DATE	
	****ASSESSOR'S USE ONLY	**** S. M	
	New FillingOccupancyAgeDenied	Approved Entered by:	
	Prior FilingOwnership 2001Perm FundFull	VariableContig	

# AFFIDAVIT OF W. Findlay Abbott (Senior Citizen or Disabled Veteran Name) AND APPLICATION FOR APPROVAL OF LATE FILING FOR SENIOR CITIZEN AND/OR DISABLED VETERAN

Failure to meet the filing deadline is based on the following reason(s): .  I was not awave that I might
qualify until I visited the borough
office for other reasons.
Office for other reasons. I am low income and behind on property taxes,
FURTHER AFFIANT SAITH NAUGHT.  Dated at Homen, Alaska, this 28 day of March, 2012.
Senidr Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this day of March, 2012  NOTARY Public, State of Alaska My Commission Expires: March 26 2015
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

### SENIOR CITIZEN EXEMPTION

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

APPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PREPERTURED

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

Return completed form and requested information to:

FEB 2 8 2012

Kenai Peninsula Borough Assessor - 144 North Binkley - Soldotna, AK 99669

907-714-2230 or 1-800-478-4441 Fax 907-714-2393

KPB ASSESSING DEPT

www.borou	ugh.kenai.ak.us/assessingo	dept	DAGGLOGING DEF
Name: Principal / partial/22	Assessor's Parcel Nun	mber: 043-160	-1/-
Mailing Address: 22 CX 173	Physical Address:	1708 and 1	110.
City: AK Žip 90///	Legal Description:	TI Wochet	Suladwisin
11. 11611	_	27 1 40577	SUPCITUISIE
Home Phone: Applicants da	ite of birth:	Spouses name:	
907-3350538	,	Carl Lee	,
Cell Phone:		Spouses date of birth:	
I am applying as a:			
	vidual age 65 or older	☐Surviving spouse a	ge 60 or older
Dwelling type:  ☑Single Family ☐ Condominium ☐	Mobile Home	Family Dwelling Other	
What percent of ownership do you alone (or jointly wi	th your spouse) have in this p	property? 100 %	
Is any portion of this property used for Commercial any	Purposes? No Yes	s Rental Purposes?	No Yes
Is occupancy shared with someone other than your sp	pouse and/or minor children?	No Yes	
If yes, when did shared occupancy begin? Date	What percer	nt of the home do they occ	cupy? %
If live in care is medically necessary, attach letter from	n the doctor.		
Do you or your spouse own property in another state? Yes	? No Yes Do you rece	ive any exemptions on tha	t property? No
When traveling outside the state of Alaska, at what a	ddress do you primarily resid	e?	
Did you receive a 2011 Alaska Permanent Fund Divid	dend? (No) Yes	-	
Will you qualify for a 2012 Alaska Permanent Fund D	Pividend? No (Yes) Will	I you or have you applied?	No Yes
If you answered "No" to any of the PFD questions, you must als online).	o complete KPB Supplemental Fo	orm #1(available at the Assessi	ng Department or
I CERTIFY: This property is my primary reside minimum of 185 days prior to each year in which temporary or vacation purposes, and is my true at am supplying on and with this form is TRUE and misrepresentation is punishable by (1) forfeiture up to \$1,000 for each violation: and (3) loss of elements.	n I receive exemption. The and fixed permanent residual of CORRECT to the best of of the exemption for that y	e property is not used for ence. I hereby certify the of my knowledge. I under year, and (2) imposition	r non residential, nat the information erstand that willful of a civil fine of
Patriciales Marilles 7	alsicis Les Va	181 2-92	1-12
PRINT OR TYPE OWNER NAME	SIGNATURE		DATE
.***/	ASSESSOR'S USE ONLY	****	
New FilingOccupancy BK A	AgeDenied	Approved Er	ntered by:
Prior FilingOwnership / USL2+	Perm FundFull	VariableContig	

### RECEIVED

AFFIDAVIT OF Paty I CIO LCC:
(Senior Citizen or Disabled Veteran Name)

FEB 2 8 2012 KPB ASSESSING DEFT

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
FURTHER AFFIANT SAITH NAUGHT.  Dated at 9:15 Am, Alaska, this 24 day of Jebruary 2012.
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this 24 day of Johnson, 2012.
OFFICIAL SEAL Shery! L. Fanning Notary Public - State of Alaska My Commission Expires April 14, 2014  My Commission Expires Expires April 14, 2014
**************************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL



## **RECEIVED**

MAR 07 2012

Mar. 7, 2012 KPB ASSESSING DEPT
Patricarllee
P.O. BOX 1203 Kenai, AK. 99611
907-335-0558
Dear Mr. Navarre,
Myhushand, age 829 Lage 76, ave residents of Kenai
(1708 2 nd Ave). This is the 1st time weaverligible for
_ the Senior Property tax exemption I did not know
there was a deadling, as I was told by the toxas ice that
You had to beapproved for the PPD & that has n't come
through yet. No notice was sent to us or in news as we
were used to While going through Papers on Feb 16, I
discovered that the Filing deadline was Feb 15. I
Immediately called + talked with Sugan Guzman.
She sent me a "Late Filing Form" to Fill out which I
did. ("Received Feb 28") I didnot elaborate on thereason.
for being distracted (cancer A). The Past 24rs.
Lemosor concer surgeries, 2 mo Radiation Prin
Anchorage, numerous Petterscars, 15,Ktolental
- Work Chadiators Ruivid myteeth). MY Husband, Surgery For -
Fractured hiffmedical bills, etc. Weave Living on SS.4
This tax would be a financial Hards hif Please Helf
Sincerely,
Patricia Lee Vary Les

### RECEIVED

MAR 07 2012

KPB ASSESSING DEPT

## LIST OF Surgeries.

DtC+ biofset.

Total Hysterectory, bilateral Salfingercopling ect only, And real Acric there.

Aurtic made dissection, cholecystectom,
excision things for ined tumor, Radical
excision things of ferrowed tumor,
2 ma. Radiation Required tumory
2 ma. Radiation Required tumory
1 more cotomy, excision Biossey mades in A.
Ling, namerous pet tet. Scars.
Historial bills for teeths ince Radiation
Hustand, surgery for broken hirthis
fast year.

All this Plus dealing with bills, medicare,
etc.



#### SENIOR CITIZEN EXEMPTION 2012

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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)

Return completed form and requested information to:

RECEIVED

Kenai Peninsula Borough Assessor - 144 North Binkley - Soldotna, AK 99669

907-714-2230 or 1-800-478-4441 Fax 907-714-2393

PRACEERING DELL www.borough.kenai.ak.us/assessingdept

LACROSS JACK P & (LEARY-LACROSS MEGAN Assessor's Parcel Number: 131-280-33 **PO BOX 331** Physical Address: 47580 LACROSS LN SOLDOTNA AK 99669-0331 T 4N R 11W SEC 23 Seward Meridian KN 2005125 Legal Description: LACROSS SUB NO 4 TRACT A-1 Home Phone: Applicants date of birth: Spouses name: 907-262-Cell Phone: Spouses date of birth: I am applying as a: Senior age 65 and spouse ☐Individual age 65 or older Surviving spouse age 60 or older Dwelling type: Single Family Condominium Mobile Home Multi-Family Dwelling Other What percent of ownership do you alone (or jointly with your spouse) have in this property? 100 Is any portion of this property used for any Commercial Purposes? (No) Rental Purposes? No Yes Is occupancy shared with someone other than your spouse and/or minor children? (No) Yes If yes, when did shared occupancy begin? Date What percent of the home do they occupy? If live in care is medically necessary, attach letter from the doctor. Do you or your spouse own property in another state? (No) Do you receive any exemptions on that property? Yes When traveling outside the state of Alaska, at what address do you primarily reside? Did you receive a 2011 Alaska Permanent Fund Dividend? Yes Will you qualify for a 2012 Alaska Permanent Fund Dividend? Will you or have you applied? No (Yes Yes 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. PRINT OR TYPE OWNER NAME **SIGNATURE** DATE \*\*\*\*ASSESSOR'S USE ONLY \*\*\*\* **New Filing** Occupancy Denied Entered by: Aae Approved **Prior Filing** Perm Fund Ownership

AFFIDAVIT OF MEGAN LEARY LACROSS
(Senior Citizen or Disabled Veteran Name)

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

RECEIVED

FEB 16 2012

KPB ASSESSING DEPT.

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
I didn't realize this exemption was evailable to
me as Jack's widow. I have struggled to pay these
texes and came to the Bow Bldg to make the last
payment on my 2011 taxes when I found out about the
FURTHER AFFIANT SAITH NAUGHT. Great help to ne to have this
Dated at Soldotna, Alaska, this 16 day of FEBRUARY, 2012. as I was
finally able
to get a
good job
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this le day of Lely March 2012 death, an
SUBSCRIBED AND SWORN TO before me this 16 day of February, 2012.
to carteting
STATE OF ALASKA Notary Public State of Alaska bills.
NOTE CITY ABIO, State of Madada
My Comm. Exp. W/ AN My Commission Expires: WITH OFFICE For Your
TARABEROS
**************************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

# SENIOR CITIZEN EXEMPTION

Prior Filing

Ownership

2012

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

APPLICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECED REVEN

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

Return completed form and requested information to:

MAR 2 9 2012

Kenai Peninsula Borough Assessor - 144 North Binkley - Soldotna, AK 99669 907-714-2230 or 1-800-478-4441 Fax 907-714-2393

KPR ASSESSING DEP

307	www.borough.kenai.ak.us/asses	sinadent	MLD 499E99IM
Name: Knug + C Stoke	-	Number: <u>065</u>	-076-30
7-10-10-0			
Mailing Address: $f \partial \beta c x / 2$	Physical Address:	29265 DENGE	AMIN RIE
City: Step Live AK Zip	CGGGT Legal Description:	Lot H BLK 1 St	ELLIN Rover Sub#
Home Phone: 707 229-1719	Applicants date of birth:	Spouses name:	3e1/;
Cell Phone: 907 - 229-4552		Spouses date of	birth:
I am applying as a:	_		
Senior age 65 and spouse	☐Individual age 65 or older	Surviving sp	ouse age 60 or older
Dwelling type:			
Single Family Condomini	um Mobile Home M	lulti-Family Dwelling	Other
What percent of ownership do you alone	(or jointly with your spouse) have in the	nis property?/(D)_	_% >
Is any portion of this property used for any	Commercial Purposes? No	Yes Rental Purpos	ses? No Yes
Is occupancy shared with someone other	r than your spouse and/or minor childr	en? (No Ye	s
If yes, when did shared occupancy begin	n? Date What pe	rcent of the home do the	ey occupy?%
If live in care is medically necessary, atta	ach letter from the doctor.		
Do you or your spouse own property in a	inother state? No Yes Do you re	eceive any exemptions o	n that property? No Yes
When traveling outside the state of Alas	ca, at what address do you primarily re	side?	
3390 GANDY BLVI	#5 St Soters	Burg, FL 3	3702
Did you receive a 2011 Alaska Permane		,	
Will you qualify for a 2012 Alaska Perma	nent Fund Dividend? No (Yes) V	Vill you or have you appl	lied? No Yes
If you answered "No" to any of the PFD quest online).	ions, you must also complete KPB Supplen	nental Form #1(available as	the Assessing Department or
I CERTIFY: This property is my primary residence prior to each year in which I receive purposes, and is my true and fixed p with this form is TRUE and CORRECT punishable by (1) forfeiture of the ex violation: and (3) loss of eligibility to PRINT OR TYPE OWNER NAME	exemption. The property is not use ermanent residence. I hereby cert CT to the best of my knowledge. I emption for that year, and (2) impo	ed for non residential, the difference of the tiffy that the information and erstand that willful position of a civil fine of the tights.	temporary or vacation I am supplying on and misrepresentation is
Yu is introduced Shriguing agg Filinder any amounting in your distance where a	****ASSESSOR'S USE OF	ngh manu	SIM
New FilingOccupanc		Approved	Entered by:

Perm Fund

\_\_\_Full \_\_\_\_Variable \_\_\_\_Contig

AFFIDAVIT OF	ROBERT C STOKES
--------------	-----------------

(Senior Citizen or Disabled Veteran Name)

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for dof good cause)	efinition
This is the first year of eligibility for the exemption. Each year I travel during the winter months. During	
the past 2 winters I have been offered temporary employment with a tax return preparation firm. In  January and February we work 60 to 80 hours per week. I did not discover the deadline for filing until  late February. Due to work schedules, this is my first opportunity to address this issue. Please accept	
this as reasonable cause for late filing. Thank you in advance for your consideration.	
FURTHER AFFIANT SAITH NAUGHT.	
Dated at, Alaska, this day of, 2012.	
Alaska notary not available.  (Senior Citizen and/or Disabled Veteran Signature)	
SUBSCRIBED AND SWORN TO before me this day of, 2012.	
Notary Public, State of Alaska My Commission Expires:	
***************************************	**
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from t Office).	he Mayor's
ASSEMBLY ACTION: APPROVAL DENIAL	

#### **SENIOR CITIZEN EXEMPTION**

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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)

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

GAUTHIER JANICE R 2555 VIP DR APT 1 KENAI AK 99611-8880 Assessor's Parcel Number:

049-410-03

Physical Address: 2555 VIP DR

Legal Description: T 5N R 11W SEC 17 Seward Meridian KN 0770055 V I P COUNTRY ESTATES SUB PART 1 LOT 21 BLK 1

Home Phone: 28 -10 5	-5 Ap	plicants date of birth:	-	Spouses name:	
Cell Phone: 398-4	0/033			Spouses date of birth:	
I am applying as a:	<del>(2.72-)</del>	í			
Senior age 65 and s	pouse	Individual age 65 or	older	Surviving spouse ag	je 60 or older
Dwelling type:			. /		
☐ Single Family	Condominium	☐Mobile Home	Multi-Fan	nily Dwelling Dother_	
What percent of ownersh	nip do you alone (o	r jointly with your spous	e) have in this p	roperty? <u>/00</u> %	
Is any portion of this pro	perty used for any	Commercial Purpose	s? No Y	es Rental Purposes?	No Yes
Is occupancy shared with	n someone other th	nan your spouse and/or	minor children?	No Yes	
If yes, when did shared of	occupancy begin?	Date	_ What percent	t of the home do they occu	ıpy? <u>35   </u> %
If live in care is medically	necessary, attach	letter from the doctor.			
Do you or your spouse o Yes	wn property in ano	ther state? No Yes	Do you receiv	ve any exemptions on that washlers home	property? (No)
When traveling outside t	ne state of Alaska,	at what address do you			
NA					
Did you receive a 2011 A	laska Permanent I	Fund Dividend? No	Yes		
Will you qualify for a 201	2 Alaska Permane	ent Fund Dividend? No	Yes Will y	ou or have you applied?	No Yes
If you answered "No" to any conline).	f the PFD questions,	you must also complete KPE	Supplemental For	m #1(available at the Assessin	Department or
minimum of 185 days	prior to each yea	r in which I receive ex	emption. The p	of abode. I will occupy property is not used for	non residential,
temporary or vacation	purposes, and is	my true and fixed per	manent reside	nce. I hereby certify that my knowledge. I under	at the information
misrepresentation is pu	unishable by (1) f	orfeiture of the exemi	otion for that ve	ear, and (2) imposition o	stand that willful
up to \$1,000 for each	/iojation: and (3)	loss of eligibility of re	ceixe/the next	five years' exemptions.	
10100 (100)	+ han		Man	) 9	11 10
PRINT OR TYPE OW	(NED NAME	- X COM	X MOSIC		715
FRINI OR LIFE OW		SIC	GNATURE	· · · · · · · · · · · · · · · · · · ·	VAIE
		****A\$SESSOR	S USE ONLY	**** SVM	
New Filing	Occupancy	Age	_Denied	Approved Enter	ered by:
Prior Filing	Ownership	/_Perm Fund	Full	Variable Contig	

AFFIDAVIT OF

(Senior Citizen or Disabled Veteran Name)

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



Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
Was unaware of Sileina data & was
unable to Send Right replicate
FURTHER AFFIANT SAITH NAUGHT.  Dated at, Alaska, this day of, 2012.
(Senior Citizen and/or Disabled Veteran Signature)
SUBSCRIBED AND SWORN TO before me this <u>ILfh</u> day of <u>Februara</u> , 2012.
OFFICIAL SEAL STATE OF ALASKA MARIAN PERRINE NOTARY PUBLIC My Comm. Exp.: WITH OFFICE  My Comm. Exp.: WITH OFFICE
*******************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL

## SENIOR CITIZEN EXEMPTION

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR
LICANTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR
VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

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

LACY DON FAMILY TRUST

104 NE 14TH AVE

LILLSBORD OR 97124-3352

Assessor's Parcel Number: 013-390-13
Physical Address: 47530 MARCH RD

Legal Description: T 7N R 11W SEC 28 Seward Meridian KN 0770160

MARCH ACRES SUB LOT 2 BLK 3

Home Phone: 907-776-4058	Applicanto data of histh	Sp	oouses name:	
Cell Phone: 907 - 394 - 0388		Sp	oouses date of birth:	
I am applying as a:  Senior age 65 and spouse	Individual age 65 or o	lder Ŀ	Surviving spouse a	ge 60 or older
Dwelling type:  ☑Single Family ☐Condom	inium  Mobile Home	☐Multi-Family □	Owelling Other	
What percent of ownership do you	alone (or jointly with your spouse)	have in this proper	rty? <u>/00</u> _%	
Is any portion of this property used	for any Commercial Purposes	? (No) Yes	Rental Purposes?	(No) Yes
Is occupancy shared with someone	other than your spouse and/or m	inor children?	(No) Yes	
If yes, when did shared occupancy	begin? Date	What percent of the	he home do they occ	upy? %
If live in care is medically necessary	, attach letter from the doctor.			
Do you or your spouse own propert Yes	y in another state? No Yes	Do you receive an	y exemptions on that	t property? (No
When traveling outside the state of	Alaska, at what address do you p	rimarily reside?		
7/85 SW Hyla	und ParkCt, Be	2averlon	OR 9700	J8
Did you receive a 2011 Alaska Perr	nanent Fund Dividend? (No)	Yes		
Will you qualify for a 2012 Alaska F	Permanent Fund Dividend? No	Yes Will you o	r have you applied?	No (Yes)
If you answered "No" to any of the PFD quonline).	estions, you must also complete KPB S	Supplemental Form #1(	available at the Assessin	ng Department or
I CERTIFY: This property is minimum of 185 days prior to eatemporary or vacation purposes. I am supplying on and with this f misrepresentation is punishable up to \$1,000 for each violation:	, and is my true and fixed pern form is TRUE and CORRECT by (1) forfeiture of the exempt	mption. The prop nanent residence to the best of my ion for that year,	erty is not used for I hereby certify th knowledge. I unde and (2) imposition	non residential, nat the information erstand that willful of a civil fine of
Donald ELacy	Douale	22 Lace	1 03/	26/12
PRINT OR TYPE OWNER NAM	IE SIG	NATURE /		DATE
	****ASSESSOR'S	USE ONLY ****		
New FilingOccup	Dane.		_Approved En	tered by:
Prior Filing Owner	rehin / Porm Fund	Eull Varia	blo Contin	

AFFIDAVIT OF

(Senior Citizen or Disabled Veteran Name)

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
(1) I did not know the Tok abatement of Fid dates were different
(1) I did not know the First abotement of Fid dates were different of 2) I was hospitatized in Oregon when the Catearrived.
FURTHER AFFIANT SAITH NAUGHT.
Dated at $\frac{3/26/2012}{50000}$ , Alaska, this $26$ day of $26$ day of $26$ , 2012.
Senior Citizen and/or Disabled Veterar Signature)
SUBSCRIBED AND SWORN TO before me this 26 day of March, 2012.
STATE OF ALASKA SUSAN L. GUZMAN NOTARY PUBLIFICATION My Comm. Exp.: WITHER  My Comm. Exp.: WITHER  Notary Public, State of Alaska My Commission Expires: WITHER  My Comm. Exp.: WITHER
**** <del>*********************************</del>
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL



#### SENIOR CITIZEN EXEMPTION

2012

(INCLUDING THE \$20,000 RESIDENTIAL EXEMPTION)
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 CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OF ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATION OR BIRTH CERTIFICATION

Return completed form and requested information to:

Kenai Peninsula Borough Assessor - 144 North Binkley - Soldotna, AK 99669

009

MAR 3 2012

907-714-2230 or 1-800-478-4441 Fax 907-714-2393

KPB ASSESSING DEPT

	www.borougn.k	enanak.us/as	essingu	=pr	VLD 499E921	NG
Name: GILLIAN 1	<u> 10ΝΝ</u> Α	Assessor's Pa	rcel Num	ber: 17765		
Mailing Address: 4309 HEI	DI CT F	hysical Addre	ess:	lante		
		egal Descript.			CB 1958 A00	, ,
·			UNI		enses Lo 1 Z	
fome Phone:	Applicants date of t	oirth:		Spouses name:		
907 226 2493		•		2	<u> </u>	
Cell Phone: 816 8149				Spouses date o	f birth:	
am applying as a:	~_					
Senior age 65 and spouse	ndividual	age 65 or older		☐ Surviving s	pouse age 60 or older	
Welling type:		г	_	r	<b></b>	
Single Family Condomin					Other	
Vhat percent of ownership do you alone	e (or jointly with your	spouse) have	in this pro	perty?	_%	
s any portion of this property used for ny	Commercial Purp	oses? No	Yes	Rental Purpo	oses? No Yes	
s occupancy shared with someone other	er than your spouse	and/or minor ch	ildren?	$(N_0)$ Y	es	
yes, when did shared occupancy begi	n? Date	Wha	t percent o	of the home do th	ey occupy? %	3
live in care is medically necessary, att	tach letter from the o	octor.				
o you or your spouse own property in			u receive	any exemptions	on that property? No	Yes
When traveling outside the state of Alas	ka, at what address	do you primaril	y reside?			
id you receive a 2011 Alaska Permane	ent Fund Dividend?	(No) Yes				
Vill you qualify for a 2012 Alaska Perm	anent Fund Dividend	l? No (Yes	Will you	u or have you app	olied? No (Yes)	
you answered "No" to any of the PFD ques nline).	tions, you must also co	omplete KPB Sup	plemental I	Form #1(available a	as the Assessing Departme	ent or
CERTIFY: This property is my primary residency rior to each year in which I receive urposes, and is my true and fixed prith this form is TRUE and CORRE unishable by (1) forfeiture of the exicolation: and (3) loss of eligibility to	exemption. The p permanent residen CT to the best of n kemption for that y	roperty is not ice. I hereby on ny knowledge ear, and (2) in	used for certify tha . I under nposition	non residential, at the information stand that willfu	temporary or vacation I am supplying on a life misrepresentation is	on and s
ILLIAN MUNN	Bu	in mu	1 <u></u>		3-01-12	
PRINT OR TYPE OWNER NAME		SIGNATU	RE		DATE	
	ASSE	SSOR'S USE	ONLY *	***		
New FilingOccupand	cy Age	Den	ied	Approved	Entered by:	
Prior Filing Ownershi	ip / Per	m Fund	Full	Variable Co	entia	



MAR \$ 2012

AFFIDAVIT OF GILLIAN MUNN (Senior Citizen or Disabled Veteran Name)

KPB ASSESSING DEPT

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

Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
I was diagnosed with Concer 7 Months sto and have
hear travelling both to Anchorage and out of State
Los diagnosed with Cancer 7 Months go and have  then travelling both to Anchorage and out of State  for discussions / examinations of Cancer
FURTHER AFFIANT SAITH NAUGHT.
Dated at $3-1-12$ , Alaska, this $15^{+}$ day of $15^{-}$ day of $15^{-}$ , 2012.
SUBSCRIBED AND SWORN TO before me thisl_ day of
**************************************
ASSEMBLY ACTION: APPROVAL DENIAL

SENIOR CITIZEN EXEMPTION

2012

\*\*\*CLUDING THE \$20,000 RESIDENTIAL EXEMPTION)

DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

NTS MUST BE AGE 65 ON OR BEFORE DECEMBER 31 OF THE PRECEDING YEAR

VERIFICATION OF AGE MUST ACCOMPANY INITIAL FILING (PASSPORT OR BIRTH CERTIFICATE)

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

MAR 2 2017

RECEIVED

		THE FREEZHING DEPT
CAROLE V NESS - I VING TRUST	Assessor's Parcel Num	ber: 013-320-34
IMPE = - EACH GA 91932-1552	Physical Address: 49	
PO 8044		N R 11W SEC 9 Seward Meridian KN 0950024 NIEL P TOLOFF SUB JOHANSEN ADDN LOT 8A
NIK: 1, AK 99635		
Home P. 3.3: Applicants da 907-776-5456	te of hirth:	Spouses name: Edward L News
Cell Phone: 407-244 4358		Spouses date of birth:
I am applying as a:		
	ual age 65 or older	☐ Surviving spouse age 60 or older
Dwelling type: ☐Single Family ☐ Condominium ☐ Mo	obile Home	ily Dwelling Other Cabin
What percent of ownership do you alone (or jointly with	th your spouse) have in this pr	operty? <u>/ 0-0</u> %
Is any portion of this property used for any Commer	rcial Purposes? (No) Yo	es Rental Purposes? (No) Yes
Is occupancy shared with someone other than your sp	oouse and/or minor children?	(No) Yes
If yes, when did shared occupancy begin? Date	What percent	of the home do they occupy?%
If live in care is medically necessary, attach letter from	the doctor.	
Do you or your spouse own property in another state? Yes		e any exemptions on that property? No
When traveling outside the state of Alaska, at what ac	ldress do you primarily reside	? (4. 1/2/12
615 9th of \$35 Imperial B	ich Cu 9.1932	NOEX AND ANDIE
Did you receive a 2011 Alaska Permanent Fund Divid	end? No Yes	
Will you qualify for a 2012 Alaska Permanent Fund Di	ividend? No (Yes) Will y	ou or have you applied? No Yes
If you answered "No" to any of the PFD questions, you must als online).	o complete KPB Supplemental Forn	n #1(available at the Assessing Department or
I CERTIFY: This property is my primary reside minimum of 185 days prior to each year in which temporary or vacation purposes, and is my true at a m supplying on and with this form is TRUE and misrepresentation is punishable by (1) forfeiture oup to \$1,000 for each violation: and (3) loss of elicenteest and the control of the control o	I receive exemption. The pand fixed permanent resident CORRECT to the best of the exemption for that ye	property is not used for non residential, nce. I hereby certify that the information my knowledge. I understand that willful ear, and (2) imposition of a civil fine of
Carole V. Ness	Parole V. ness	March 2, 2012
PRINT OR TYPE OWNER NAME	SIGNATURE	DATE
_****A	SSESSOR'S USE ONLY *	оченивания положения очения о нависим от нависимного и заходного нависимного от положения от от судования од н ***
W	ge Denied	Approved Entered by:
		PP. 0104

Perm Fund

\_Full \_\_\_\_Variable \_\_\_\_Contig

Prior Filing

Ownership

	AFFIDAVIT OF
	FOR SENIOR CITIZEN AND/OR DISABLED VETERAN
	This Application is made Pursuant to <u>A.S. 29.45.030 Required Exemptions</u> and <u>KPB Code 5.12.105.</u> Real Property Tax-Exemptions - Senior Citizens, Disabled Veterans and surviving spouses thereof.
211 march distinction	Failure to meet the filing deadline is based on the following good cause: (see reverse for definition of good cause)
	I was residing in AK Feb 15th but failed to
4	Understand I needed get it in.
	When I am out of state its in health reasons.
3	FURTHER AFFIANT SAITH NAUGHT.
Africa	Dated at Soldwina, Alaska, this 2 day of Marde, 2012.
	Paral 11 mas
	(Senior Citizen and/or Disabled Veteran Signature)
	SUBSCRIBED AND SWORN TO before me this 2 day of March, 2012.
	OFFICIAL SEAL STATE OF ALACKA
	SUSAN L. GUZMAN NOTARY PUBLIC My Comm. Exp.: W/ Office My Commission Expires: w/ Office
	My Commission Expires Marie Commission Commi
	*************************
	(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
	ASSEMBLY ACTION: APPROVAL DENIAL

#### **DISABLED VETERAN EXEMPTION**

2012



### DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

APPLICANTS MUST PROVIDE DOCUMENTATION EACH YEAR OF 50% OR MORE SERVICE CONNECTED DISABILITY TO QUALIFY

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

ME'S LASESSING DEP.

RECEIVED

MARK D TORNAI 33642 KEYSTONE DR SOLDOTNA AK 99669-8532 Assessor's Parcel Number:

135-260-27

Physical Address: 33642 KEYSTONE DR

Legal Description: T 4N R 10W SEC 2 Seward Meridian KN 2003052 MOOSE RANGE MEADOWS SUB 2003 RESUB LOT 4A

Home Phone: 748-3299	Applicants date of hirth	Spouses name:
Cell Phone: 748 - 329 9		Spouses date of birth:
I am applying as a: Dis	sabled Veteran	ing spouse age 60 or older
Have you received this exemption be If YES, list the account/pare	efore? No Yes cel number for the previous exemption:	
Do you have a disability rated 50% of	or greater by the VA?	⊠Yes
Is disability "service connected"?	No ⊠Yes	
Dwelling type:  ☐ Single Family ☐ Condor	minium  Mobile Home  Mult	i-Family Dwelling
What percent of ownership do you a	alone (or jointly with your spouse) have i	n this property? // O %
Is any portion of this property used t	for any Commercial Purposes? No	☐ Yes Rental Purposes? ☑ No ☐ Yes
Is occupancy shared with someone	other than your spouse and/or minor chi	ildren? ⊠ <sub>No</sub> □Yes
If yes, when did shared occupancy but the share occupa		percent of the home do they occupy?%
Do you or your spouse own property		
If yes, do you receive any exemption		
	Alaska, at what address do you primarily らんかと ひトー らくんの	1 1 1
ASSESSMENT YEAR. AS OF JANUARY		AS PROVIDED IN AS29.45.030(E) FOR THE 2012 ED AND OCCUPIED THE ABOVE DESCRIBED RING THE PREVIOUS YEAR.
I UNDERSTAND THAT WILLFUL MISRE	PRESENTATION IS PUNISHABLE BY (1) FO	ID CORRECT TO THE BEST OF MY KNOWLEDGE.  DRFEITURE OF THE EXEMPTION FOR THAT YEAR,  ND (3) LOSS OF ELIGIBILITY TO RECEIVE THE
Mark Tornai	Mark Journ	: 3/29/12
PRINT OR TYPE OWNER NAM	E SIGNATURE	DATE
	****ASSESSOR'S USE (	DNLY **** 5.W
New FilingOccupan		Approved Entered by:
Prior Filing 9/3x/11_Ownersh	nip <u>50%</u> DisabilityFull	VariableContig

#### AFFIDAVIT OF Mark Tornac (Senior Citizen or Disabled Veteran Name) AND APPLICATION FOR APPROVAL OF LATE FILING

## 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) Trecenty moved to Soldatua in Oct 2011. I received my initial tax assessment this month and noted it was assessed \$100,000 over the purchase price and appraisal value. As a result I looked Disabled vet Exemption, however it was already past the FURTHER AFFIANT SAITH NAUGHT. Biling date, therefore I am requesting a late scienission. Dated at at Soldwing, Alaska, this 30 day of Warch, 2012. SUBSCRIBED AND SWORN TO before me this 30 day of March, 2012. Notary Public, State of Alaska, My Commission Expires: W/ (Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).

DENIAL

APPROVAL

ASSEMBLY ACTION:

#### **DISABLED VETERAN EXEMPTION**

#### DUE ON OR BEFORE FEBRUARY 15TH OF THE EXEMPTION YEAR

APPLICANTS MUST PROVIDE DOCUMENTATION EACH YEAR OF 50% OR MORE SERVICE CONNECTED DISABILITY TO QUALIFY

RECEIVED

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

MAR 08 2012

www.borough.kenai.ak.us/assessingdept

**KPB ASSESSING DEPT** 

SVOBODA COMMUNITY PROPERTY TRUST PO BOX 3289 HOMER AK 99603-3289

Assessor's Parcel Number:

175-070-31

Physical Address: 2103 STERLING HWY

Legal Description: T 6S R 14W SEC 23 Seward Meridian HM 2005103 R & V HOMESTEAD SUB LOT 1

Home Phone:	Applicants date of birth:	Spouses name:
907 - 235-0608	,	SHIRLEY SVOBODA
Cell Phone:		Spouses date of hirth:
967-399-5104		· ' ·
I am applying as a: Disab	leo veteran L Survivi	ing spouse age 60 or older
Have you received this exemption before	re? ∱ZINo □Yes	
If YES, list the account/parcel	number for the previous exemption:	
Do you have a disability rated 50% or g	reater by the VA?	Yes
Is disability "service connected"?	□No XYes	
Dwelling type:	_	
Single Family Condomin	ium Mobile Home Mult	i-Family Dwelling
What percent of ownership do you alon	e (or jointly with your spouse) have I	n this property? /dO_%
Is any portion of this property used for a	any Commercial Purposes? XN	O □Yes Rental Purposes? ▼No □Yes
Is occupancy shared with someone other	er than your spouse and/or minor ch	ildren? 🕅 No 🗆 Yes
	0.004	0/
If yes, when did shared occupancy begi	in? Date what	percent of the home do they occupy?%
If live in care is medically necessary, att	ach letter from the doctor.	
Do you or your spouse own property in	another state? No Yes	
If yes, do you receive any exemptions of	n that property? No Yes	
When traveling outside the state of Alas	ska, at what address do you primarily	y reside?
BETTY SVO	BODA 1599 LEISU	REWORLD, MESA AZ 85200
	'ERAN EXEMPTION ON MY PROPERTY T OF THE ASSESSMENT YEAR, I OWNI	AS PROVIDED IN AS29.45.030(E) FOR THE 2012 ED AND OCCUPIED THE ABOVE DESCRIBED
		ID CORRECT TO THE BEST OF MY KNOWLEDGE.
I UNDERSTAND THAT WILLFUL MISREPRE	ESENTATION IS PUNISHABLE BY (1) FO	DRFEITURE OF THE EXEMPTION FOR THAT YEAR, ND (3) LOSS OF ELIGIBILITY TO RECEIVE THE
GRADY L, SUDBOL	DA Geray- E. Sur	2/08/12
PRINT OR TYPE OWNER NAME	SIGNATURE	DATE
tota, militäristionaine menetrist vallisallityste dakse ordinaministiativi praedest Matte. Ma savittatus valtatus eta eta este este eta este este eta este este	****ASSESSOR'S USE (	ONLY **** CVM
New FilingOccupancy	Denied	S VApproved Entered by:
Prior Filing Ownership	9096 DisabilityFull	VariableContig

## AFFIDAVIT OF GRADY L SVOBODA (Senior Citizen or Disabled Veteran Name) AND APPLICATION FOR APPROVAL OF LATE FILING FOR SENIOR CITIZEN AND/OR DISABLED VETERAN

Failure to meet the filing deadline is based on the following reason(s):
31,2012, I DIDN'T REALIZE THE INITIAL
DEADLINE WAS FEB 15. I WAS TRAVELING TO
ANCHORAGE FOR OPER SWEGET IN FEB.
FURTHER AFFIANT SAITH NAUGHT.  Dated at, Alaska, this 8 day of MARCH, 2011.
HOMER  Subject Survivoda  (Senior Cifizen and/or Disabled Veteran Signature)  SUBSCRIBED AND SWORN TO before me this day of March, 2011  Notary Public, State of Alaska My Commission Expires: /////
***********************************
(Exemption applications submitted for consideration for late-file acceptance will be forwarded to the Assembly from the Mayor's Office).
ASSEMBLY ACTION: APPROVAL DENIAL