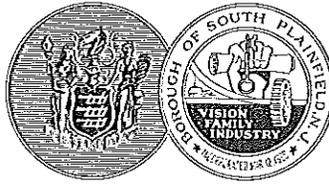


AREA CODE 908

Mayor's Office-226-7601  
Clerk-226-7606  
Assessing-226-7623  
Building Dept.-226-7640  
CFO/Administrator-226-7602  
Computer Services-226-7649  
Emergency Mgmt.-226-7718  
Eng./IT&M Assoc.-732-671-6400  
Environmental-226-7621  
Finance-226-7615  
Fire Official-756-4761



## BOROUGH OF SOUTH PLAINFIELD

2480 Plainfield Avenue  
South Plainfield, NJ 07080

AREA CODE 908

Health-226-7630  
Library-754-7885  
Municipal Court-226-7651  
Plan Bd/Bd. of Adj.-226-7641  
Police-755-0700  
Public Works-755-2187  
Recreation-226-7713  
Recycling-226-7621  
Social Services-226-7625  
Tax/Sewer-226-7610  
Senior Center-754-1047

### Veteran or Surviving Spouse/Civil Union or Domestic Partner of Veteran or Serviceperson Property Tax Reduction Application

Please complete BOTH forms entirely.

The Claim form should be completed, signed and dated.

The Supplemental form should also be completed in its entirety and signed.

You must include a copy of Form DD214 along with your application.

Return the above to the **South Plainfield Tax Assessor's office**. The Tax Assessor will review the submitted forms to determine if you are eligible for the *Veteran Deduction* for which you are applying.

If you have questions regarding the completion of the forms or eligibility, please contact the Tax Assessor's office at (908) 226-7623, Monday through Friday, 8:00 am to 4:00 pm.

Thank you.

**APPLICATION FILING PERIOD** - File this claim with the municipal tax assessor from October 1 through December 31 of the pretax year, i.e., the year prior to the calendar tax year or with the municipal tax collector from January 1 through December 31 of the calendar tax year. For example, for a property tax deduction claimed for calendar tax year 2011, the pretax year filing period would be October 1 - December 31, 2010 with the assessor and the tax year filing period would be January 1 - December 31, 2011 with the collector.

**ELIGIBILITY REQUIREMENTS** - All requirements for deduction must be met as of October 1 of the pretax year, i.e., the year prior to the calendar tax year for which the deduction is claimed.

A. **Veteran Claimant** as of October 1 pretax year must:

1. have had active wartime service in United States Armed Forces and been honorably discharged;
2. own the property, wholly or in part, or hold legal title to the property for which deduction is claimed;
3. be a citizen and legal or domiciliary resident of New Jersey.

B. **Surviving Spouse/Civil Union or Domestic Partner Claimant** as of October 1 pretax year must:

1. document that the deceased veteran or serviceperson was a citizen and resident of New Jersey at death who had active wartime service in the United States Armed Forces and who was honorably discharged or who died on active wartime duty;
2. not have remarried/formed a new registered civil union or domestic partnership;
3. be a legal or domiciliary resident of New Jersey;
4. own the property, wholly or in part, or hold legal title to the property for which deduction is claimed.

NOTE \*\*Claimants must inform the assessor of any change in status which may affect their continued entitlement to the deduction.

**VETERAN DEFINED** - means any New Jersey citizen and resident honorably discharged from active wartime service in the United States Armed Forces. Current statute does not provide for deduction for military personnel still in active service who have not been discharged.

For assistance in documenting veterans' status, contact the NJ Department of Military and Veterans Affairs at (609) 530-6958 or (609) 530-6854. The United States Veterans Administration may be contacted at 1-800-827-1000

**ACTIVE SERVICE TIME OF WAR DEFINED** - means military service during one or more of the specific periods listed under #5 on front of this VSS Claim. Active duty for training or field training purposes as a member of a reserve component does NOT constitute active service time of war unless activated into Federal military service by Presidential or Congressional order.

**CITIZEN & RESIDENT DEFINED** - United States Citizenship is not required. Resident for purposes of this deduction means an individual who is legally domiciled in New Jersey. Domicile is the place you regard as your permanent home - the place you intend to return to after a period of absence. You may have only one legal domicile even though you may have more than one place of residence. Seasonal or temporary residence in this State, of whatever duration, does not constitute domicile. Absence from the State for a 12 month period is prima facie evidence of abandonment of domicile.

**SURVIVING SPOUSE/CIVIL UNION OR DOMESTIC PARTNER DEFINED** - means the lawful widow or widower/civil union or domestic partner of a qualified New Jersey resident veteran or serviceperson, who has not remarried/formed a new registered civil union or domestic partnership.

NOTE\*\*A surviving spouse/civil union or domestic partner though a New Jersey resident himself/herself is not entitled to deduction if the deceased veteran/serviceperson spouse/civil union or domestic partner at death was not a New Jersey resident.

**DOCUMENTARY PROOFS REQUIRED** - Each assessor and collector may require such proofs necessary to establish claimant's deduction entitlement and photocopies of any documents should be attached to this claim as part of application record.

**MILITARY RECORDS** Certificate of Honorable Discharge or Release, Form DD214, or Military Notification of Death or Certification of United States Veteran's Administration.

**SURVIVING SPOUSE/CIVIL UNION OR DOMESTIC PARTNER** Death Certificate of decedent, marriage license/civil union or domestic partnership registration certificate.

**OWNERSHIP** real property deed, executory contract for property purchase; or Last Will and Testament if by devise or if intestate or without a will give names and relationships of decedent's heirs-at-law.

**RESIDENCY** New Jersey driver's license or motor vehicle registration, voter's registration, etc.

**APPEALS** - A claimant may appeal any unfavorable determination by the assessor or collector to the County Board of Taxation annually on or before April 1.

\*\*\*\*\*

This form is prescribed by the New Jersey Division of Taxation, as required by law, and may be reproduced for distribution, but may not be altered without prior approval.

PROPERTY TAX DEDUCTION CLAIM BY VETERAN OR SURVIVING SPOUSE/CIVIL UNION OR DOMESTIC PARTNER OF VETERAN OR SERVICEPERSON

(N.J.S.A. 54:4-8.10 et seq.; P.L.1963, c.171 as amended; N.J.A.C. 18:27-1.1 et seq.)

IMPORTANT File this completed claim with your municipal tax assessor or collector. (See instructions on reverse.)

1. CLAIMANT OWNER'S NAME

2. CLAIMED PROPERTY LOCATION

Street Address Unit #, if Co-op Phone #

County Municipality

Block Lot Qualifier

Mailing Address if different than Claimed Property Location

3. YEAR OF DEDUCTION This deduction is claimed for the tax year (indicate tax year)

4. VETERAN/SURVIVING SPOUSE/CIVIL UNION OR DOMESTIC PARTNER OF VETERAN OR SERVICEPERSON Check A, B, or C

- A. Honorably discharged veteran with active wartime service in the United States Armed Forces. ATTACH copy DD214.
B. Surviving spouse/civil union or domestic partner of honorably discharged veteran with active wartime service in the United States Armed Forces; and
C. Surviving spouse/civil union or domestic partner of serviceperson who died on wartime active duty in the United States Armed Forces; and

5. ACTIVE WARTIME SERVICE PERIOD (Check All Applicable Service Periods)

- \*\*A. Operation Northern/Southern Watch August 27, 1992 - March 17, 2003
\*\*B. Operation Iraqi Freedom March 19, 2003 - Ongoing
\*\*C. Operation Enduring Freedom September 11, 2001 - Ongoing
\*\*D. Joint Endeavor/Joint Guard - Bosnia & Herzegovina November 20, 1995 - June 20, 1998
\*\*E. Restore Hope Mission - Somalia December 5, 1992 - March 31, 1994
\*\*F. Operation Desert Shield/Desert Storm Mission August 2, 1990 - February 28, 1991
\*\*G. Panama Peacekeeping Mission December 20, 1989 - January 31, 1990
\*\*H. Grenada Peacekeeping Mission October 23, 1983 - November 21, 1983
\*\*I. Lebanon Peacekeeping Mission September 26, 1982 - December 1, 1987
J. Vietnam Conflict December 31, 1960 - May 7, 1975
\*\*K. Lebanon Crisis of 1958 July 1, 1958 - November 1, 1958
L. Korean Conflict June 23, 1950 - January 31, 1955
M. World War II September 16, 1940 - December 31, 1946
N. World War I April 6, 1917 - November 11, 1918

\*\*NOTE - Peacekeeping Missions require a minimum of 14 days service in the actual combat zone except where service-incurred injury or disability occurs in the combat zone, then actual time served, though less than 14 days, is sufficient for purposes of property tax exemption or deduction.

6. PROPERTY OWNERSHIP

If the above named claimant, owned, wholly or in part on (deed date) the property above identified. Property must be owned as of October 1 of the pretax year, i.e., the year prior to the tax year for which deduction is claimed.

\*\*Complete 6a only if partial owners of claimed property

6a. Name(s) of part owner(s) % ownership interest in property
\*\*Complete 6b only if claimed property is a Cooperative or Mutual Housing Corporation in which you're a Tenant-Shareholder.

6b. Corporation Name of Cooperative or Mutual Housing

Co-Op/MH. Corp. Street Address Municipality State
\$ Net Property Tax Amount for Unit Co-op Mutual Housing Corp.

7. CITIZENSHIP & RESIDENCY (Check A or B)

- A. I, the above claimant veteran, was a citizen and legal or domiciliary resident of New Jersey as of October 1 of the pretax year.
B. I, the above claimant surviving spouse/civil union or domestic partner, was a citizen and legal or domiciliary resident of New Jersey as of October 1 of the pretax year; and
My deceased veteran or serviceperson spouse/civil union or domestic partner was a citizen and resident of New Jersey at death.

8. TAX DEDUCTION OTHER PROPERTY

If I am not receiving a Veteran's Property Tax Deduction on any other property for the same tax year except as indicated here:

Street Address Municipality

I certify the above declarations are true to the best of my knowledge and belief and understand they will be considered as if made under oath and subject to penalties for perjury if falsified.

Signature of Claimant Date

OFFICIAL USE ONLY - Block Lot Approved in amount of \$
Veteran Surviving Spouse/Civil Union or Domestic Partner of Veteran or Serviceperson

Assessor/Collector Date

### SUPPLEMENTAL FORM FOR PEACEKEEPING MISSIONS & OPERATIONS

This form is in addition to the Form DD-214, Armed Forces of the United States Report of Transfer or Discharge, where the DD-214 is not specific about participation in a Peacekeeping Mission/Operation.

All Peacekeeping Missions/Operations have the added provision that the Veteran **must** have one of the following types of service for a total of 14 days. The 14 day requirement is waived where a service injury was received in a combat zone in favor of actual time served in a combat zone though less than 14 days.

1. Service in the specific country for the Peacekeeping Mission/Operation, OR
2. Service on board any ship actively engaged in patrolling the territorial waters of the specific country for the Peacekeeping Mission/Operation, OR
3. Service in the airspace above the Republic of Bosnia and Herzegovina.

If Active Wartime Service Period indicated on Form V.S.S., Veteran/or Surviving Spouse/Surviving Civil Union Partner/Surviving Domestic Partner of a Veteran or Serviceperson Claim For Property Tax Deduction or Form D.V.S.S.E., Claim For Property Tax Exemption on Dwelling House of Disabled Veteran or Surviving Spouse/Surviving Civil Union Partner/Surviving Domestic Partner of Disabled Veteran or Serviceperson is a Peacekeeping Mission/Operation, please provide the following information regarding that service:

#### 1. CLAIMANT NAME

\_\_\_\_\_  
Name Of Claimant Owner

#### 2. CLAIMED PROPERTY LOCATION

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Unit #, if Co-Op

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
County

\_\_\_\_\_  
Municipality

\_\_\_\_\_  
Block

\_\_\_\_\_  
Lot

\_\_\_\_\_  
Qualifier

\_\_\_\_\_  
Mailing Address if different from Claimed Property Location

#### 3. SERVICE IN THE SPECIFIC COUNTRY

Name of the Country \_\_\_\_\_

Actual Dates of Service in the Combat Zone \_\_\_\_\_

#### 4. SERVICE ON BOARD A SHIP

Name of the Vessel \_\_\_\_\_

Name of Territorial Waters Patrolled \_\_\_\_\_

Actual Dates of Service Patrolling the Waters \_\_\_\_\_

#### 5. SERVICE IN AIRSPACE

Name of the Country \_\_\_\_\_

Actual Dates of Service in Combat Airspace \_\_\_\_\_

I certify the above declarations are true to the best of my knowledge and belief and understand they will be considered as if made under oath and subject to penalties for perjury if falsified.

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Date

Additional proofs for the requirement of Active Wartime Service may be:

1. Military Certificate indicating your participation in the Mission/Operation and the actual dates of service.
2. Deployment Orders
3. Pay stubs indicating endangerment pay for the time period required.
4. Letter from Military Officer on official letterhead indicating the location, date and type of service.
5. Any other official document to support your claim.