TOWN OF PUTNAM
ASSESSOR'S OFFICE
200 SCHOOL STREET
PUTNAM CONNECTICUT 06260
860-963-6800 EXT 171
ASSESSOR@PUTNAMCT.US

SURVIVING SPOUSE OF PERMANENTLY AND TOTALLY DISABLED VETERAN (100% SERVICE-CONNECTED OR TDIU)

Tax Exemption Application

- Submit this application ***annually*** to the Putnam Assessor's Office between October 1st and January 1st each year. (Note that the January 1st deadline will be extended to the next regular business day.)
- ***Attach a copy of determination*** by the United States Department of Veterans Affairs indicating Permanent and Total Disability rating every year.

Name of applicant/surviving spouse: _____

Residential address: _____

Mailing address (if different): _____

Phone number: _____

Name of veteran: _____

Birthdate of veteran: _____

Social Security # or Department of Defense # of veteran: _____

Date of death of veteran: _____

Are you a resident of Putnam, CT?	YES / NO
Are you the widow or widower of a deceased veteran?	YES / NO
Have you remarried?	YES / NO

CERTIFICATION

I CERTIFY UNDER THE PENALTIES OF FALSE STATEMENT THAT I MEET THE REQUIREMENTS OF CONNECTICUT GENERAL STATUTE 12-81(83)(F) AS ADOPTED BY THE TOWN OF PUTNAM AND AM ENTITLED TO THE TAX EXEMPTION PROVIDED FOR THEREIN. I HAVE NOT SUBMITTED, AND WILL NOT SUBMIT, A CLAIM FOR THIS EXEMPTION IN ANY OTHER MUNICIPALITY.

_____ _____

Applicant's Signature Date