

PTR-1



STATE OF NEW JERSEY  
~~2017~~ <sup>2018</sup> SENIOR FREEZE

(PROPERTY TAX REIMBURSEMENT) APPLICATION

↓ You must enter your Social Security Number below ↓

For Privacy Act Notification, See Instructions	Your Social Security Number	Last Name, First Name and Initial (Joint applicants, enter first name and initial of each. Enter spouse/CU partner last name ONLY if different)		
	Spouse's/CU Partner's Social Security Number	Home Address (Number and Street, including apartment number or rural route)		
	County/Municipality Code (See instructions)	City, Town, Post Office	State	Zip Code
	8 5 1 0 0 2 0 1 5	WINSTON, WALTER + WENDY		
	8 5 2 0 0 2 0 1 5	123 ELM		
	1 8 0 1	PLUCKEMIN	NJ	07978

Place label on form if all preprinted information is correct. Otherwise, print or type your name and address.

This is a three-page application. You must complete all three pages. Fill in ovals completely.

~~2016~~ <sup>2017</sup> AND ~~2017~~ <sup>2018</sup> MUST BE SUBMITTED WITH APPLICATION

Age 65 or Older: Copy of one – Birth Certificate, Driver's License, Church Records  
Receiving Federal Social Security Disability Benefits: Copy of Social Security Award Letter  
See instructions for more information.

MARITAL/CIVIL UNION STATUS

- Your Marital/Civil Union Status on December 31, ~~2016~~ <sup>2017</sup>:  ← Single  ← Married/CU Couple
- Your Marital/Civil Union Status on December 31, ~~2017~~ <sup>2018</sup>:  ← Single  ← Married/CU Couple

AGE/DISABILITY STATUS

- On December 31, ~~2016~~ <sup>2017</sup>, were you age 65 or older?
 

Yourself	<input checked="" type="radio"/> ← Yes	<input type="radio"/> ← No
Spouse/CU Partner	<input type="radio"/> ← Yes	<input checked="" type="radio"/> ← No
- On or before December 31, ~~2016~~ <sup>2017</sup>, were you actually receiving Federal Social Security disability benefit payments?
 

Yourself	<input type="radio"/> ← Yes	<input checked="" type="radio"/> ← No
Spouse/CU Partner	<input type="radio"/> ← Yes	<input checked="" type="radio"/> ← No
- On December 31, ~~2017~~ <sup>2018</sup>, were you age 65 or older?
 

Yourself	<input checked="" type="radio"/> ← Yes	<input type="radio"/> ← No
Spouse/CU Partner	<input type="radio"/> ← Yes	<input checked="" type="radio"/> ← No
- On or before December 31, ~~2017~~ <sup>2018</sup>, were you actually receiving Federal Social Security disability benefit payments?
 

Yourself	<input type="radio"/> ← Yes	<input checked="" type="radio"/> ← No
Spouse/CU Partner	<input type="radio"/> ← Yes	<input checked="" type="radio"/> ← No

Applicant(s) must meet the age or disability requirements for both ~~2016~~ <sup>2017</sup> and ~~2017~~ <sup>2018</sup>. If neither you nor your spouse/CU partner met the requirements, you are not eligible for the reimbursement, and you should not file this application. See "Eligibility Requirements" on page 1 of instructions.

RESIDENCY REQUIREMENTS

- Have you lived in New Jersey continuously since December 31, ~~2006~~ <sup>2007</sup>, or earlier as either a homeowner or a renter?  ← Yes  ← No  
If "No," STOP. You are not eligible for the reimbursement, and you should not file this application.
- Have you owned and lived in the same New Jersey home since December 31, ~~2013~~ <sup>2014</sup> or earlier? (Mobile Home Owners, see instructions)  ← Yes  ← No  
If "No," STOP. You are not eligible for the reimbursement, and you should not file this application.

CONTINUE TO PAGE 2 →



Name(s) as shown on PTR-1

WINSTON, WALTER WENBY

Your Social Security Number

851-00-2015

DETERMINING TOTAL INCOME: LINES 7 and 8: Enter your annual income for 2016 and 2017. See "Income Standards" and "Determining Total Income" in the instructions for information on possible sources of income and how to determine the amount to be reported in each category. If you had no income in a particular category, leave that line blank. Losses in one category of income cannot be used to reduce total income. If you have a net loss in any income category, leave that line blank. If you were married or in a civil union as of December 31 of either 2016 or 2017, and living in the same household, combine your incomes for that year. If you lived in separate households, file as "single."

Table with columns for INCOME CATEGORIES, 2017, and 2018. Rows include Social Security Benefits, Pension and Retirement Benefits, Salaries, Wages, Bonuses, Commissions, and Fees, Unemployment Benefits, Disability Benefits, Interest, Dividends, Capital Gains, Net Rental Income, Net Profits From Business, Net Distributive Share of Partnership Income, Net Pro Rata Share of S Corporation Income, Support Payments, Inheritances, Bequests, and Death Benefits, Royalties, Gambling and Lottery Winnings, and All Other Income.

Add lines a-q in each column. Enter total 2016 income on Line 7 and total 2017 income on Line 8.

64,496.00

7. TOTAL 2016 INCOME 2017

74,104.00

8. TOTAL 2017 INCOME 2018

Total annual income cannot exceed amounts shown.

Was your total 2016 income on Line 7 \$87,007 or less?

[X] Yes. See 2017 income eligibility.

[ ] No. STOP. You are not eligible for the reimbursement, and you should not file this application.

Was your total 2017 income on Line 8 \$87,268 or less?

(See "Impact of State Budget" on page 1 of instructions which explains how the State Budget may reduce the income limit.)

[X] Yes. Go to page 3.

[ ] No. STOP. You are not eligible for the reimbursement, and you should not file this application.



Name(s) as shown on PTR-1

Your Social Security Number

PRINCIPAL RESIDENCE

9. Status (fill in appropriate oval):  ← Homeowner  ← Mobile Home Owner

10. Homeowners: Enter the below information for your <sup>2018</sup>2017 principal residence. (See instructions for Qualifier)

Block	Lot	Qualifier
2 3 4 5 6	0 0 0 5 6	

11a. Did you share ownership of this property with anyone other than your spouse/CU partner? (Mobile Home Owners, see instructions) ...  Yes  No

11b. If you answered "Yes," indicate the share (percentage) of the property owned by you (and your spouse/CU partner) (Mobile Home Owners, see instructions) ...  %

12a. Did this property consist of multiple units? ...  Yes  No

12b. If you answered "Yes," indicate the share (percentage) of the property that you (and your spouse/CU partner) used as your principal residence. ...  %

See instructions before completing Lines 13 and 14 if you:

- Answered "Yes" at Line 11a or Line 12a; or
- Received any deduction(s) and/or credit(s) on your property tax bills.

PROPERTY TAXES

Proof of Property Taxes Due and Paid for <sup>2017</sup>2016 and <sup>2018</sup>2017 Must be Submitted With Application. See instructions.

13. Enter your total <sup>2018</sup>2017 property taxes due and paid on your principal residence. (For Mobile Home Owners, property taxes are your total site fees paid multiplied by 0.18). ... 13. 7,110.00

14. Enter your total <sup>2017</sup>2016 property taxes due and paid on your principal residence. (For Mobile Home Owners, property taxes are your total site fees paid multiplied by 0.18). ... 14. 6,840.00

REIMBURSEMENT AMOUNT (See "Impact of State Budget" on page 1 of instructions.)

15. Reimbursement. (Amount to be sent to you. Subtract Line 14 from Line 13) ... 15. 270.00

If Line 15 is zero or less, you are not eligible for a reimbursement, and you should not file this application.

If enclosing copy of death certificate for deceased applicant, check box. (See instructions)

Under the penalties of perjury, I declare that I have examined this Senior Freeze (Property Tax Reimbursement) Application, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. If prepared by a person other than applicant, this declaration is based on all information of which the preparer has any knowledge.

SIGN HERE

Your Signature TP SIGN Date Spouse's/CU Partner's Signature (if applying jointly, BOTH must sign) SP SIGN

Your daytime telephone number and/or email address (optional) 555-555-5555

Paid Preparer's Signature Federal Identification Number

Firm's Name Federal Employer Identification Number 1524050099

Due Date: October 31, 2018
Mail your completed application to:
NJ Division of Taxation
Revenue Processing Center
Senior Freeze (PTR)
PO Box 635
Trenton, NJ 08646-0635
Senior Freeze (PTR)
Hotline: 1-800-882-6597

Division Use	1	2	3	4	5	6	7
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# Homeowners

Verification of <sup>2017</sup>2016 and <sup>2018</sup>2017 Property Taxes  
 (Use blue or black ink. See instructions for completion on back.)

## Part I – To Be Completed by Applicant (Part II to be completed by tax collector)

Social Security # 851 - 00 - 2015 Spouse's/CU Partner's Social Security # 852 - 00 - 2015

Name WINSTON WALTER + WENDY  
Last Name, First Name, and Initial (Joint filers, enter first name and initial of each - Enter spouse's/CU partner's last name ONLY if different)

Address 123 ELM PLUCKEMIN NJ 07978  
Street City State Zip Code

Block 23456 Lot 00056 Qualifier 2017 2018

	2016	2017
A. Did you own this property with someone who was not your spouse/CU partner?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
B. If yes, indicate the share (percentage) of property that you (and your spouse/CU partner) owned.	<input type="text"/> %	<input type="text"/> %
C. Did this property consist of multiple units?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
D. If yes, indicate the share (percentage) of property used as your principal residence.	<input type="text"/> %	<input type="text"/> %

## Part II – To Be Completed by Tax Collector

### 2017 2018 Property Taxes

- Check box if property had a tax appeal for ~~2016~~2017...
- Check box if property had an added assessment for 2016.
- 1. Assessed Value ..... <sup>2017</sup>\$ 300,000
- 2. Tax Rate (including fire and other special tax rates) ..... 2.28 %
- 3. Total Property Taxes (Multiply Line 1 by Line 2) ..... \$ 6840
- 4. REAP Credit (if any) ..... \$ \_\_\_\_\_
- 5. Enter amount from Line 3. If applicant answered "Yes" to Questions A and/or C above, you must apportion the amount on Line 3 when completing this line. (See instructions on back.) ..... \$ 6840

### 2016 2017 Property Taxes

- Check box if property had a tax appeal for 2017~~2018~~...
- Check box if property had an added assessment for 2017.
- 1. Assessed Value ..... <sup>2018</sup>\$ 300,000
- 2. Tax Rate (including fire and other special tax rates) ..... 2.37 %
- 3. Total Property Taxes (Multiply Line 1 by Line 2) ..... \$ 7110
- 4. REAP Credit (if any) ..... \$ \_\_\_\_\_
- 5. Enter amount from Line 3. If applicant answered "Yes" to Questions A and/or C above, you must apportion the amount on Line 3 when completing this line. (See instructions on back.) ..... \$ 7110

Homeowners, enter this amount on Line 14 of your Form PTR-1

Homeowners, enter this amount on Line 13 of your Form PTR-1

Under the penalties of perjury, I certify that I am the local tax collector of \_\_\_\_\_ where the above property is located. I further certify that the above-stated amounts of property taxes due were paid for calendar years ~~2016~~ and 2017 and are true and accurate to the best of my knowledge. I have placed my stamp below for verification. <sup>2017</sup> <sup>2018</sup>

MM 4/15/19  
 (Name) (Date)  
TAX CLERK  
 (Title)

# Form PTR-1A — Instructions

## Part I – To Be Completed by Applicant

**Social Security Number.** If your marital/civil union status as of December 31, 2017, was single, enter only your Social Security number in the space provided on Form PTR-1A. If your status as of December 31, 2017, was married/CU couple, you must report both applicants' numbers in the order in which the names are listed on the application. If you were married or in a civil union but living apart from your spouse/CU partner, and you did not have access to or receive support from their income, you are considered "Single" for purposes of the property tax reimbursement. You should enter only your Social Security number on Form PTR-1A.

**Name and Address.** Print or type your name (last name first) and complete address of the property for which you are claiming the reimbursement in the spaces provided. Also include your spouse's/CU partner's name if filing jointly.

**Block/Lot/Qualifier.** Enter the block and lot numbers of the principal residence for which you are claiming the reimbursement in the spaces provided. Include qualifier if applicable. (Only condominiums may have qualifiers assigned to them.)

- A. Multiple Owners.** Check "Yes" if you owned the property that was your principal residence with someone who was not your spouse/CU partner – even if the other owner(s) did not live there. For example, you and your sister owned the home you lived in. If you (and your spouse/CU partner) were the sole owner(s), check "No."
- B. Percentage of Ownership.** If you answered "Yes" at Line A, enter the share (percentage) of the property that you (and your spouse/CU partner) owned. For example, you and your spouse owned a home with your sister. Your sister did not live with you, and you and your spouse paid all the property taxes. You must enter 50% as your share of ownership because you and your spouse owned only one-half (50%) of the property. The shares of ownership of the property are considered to be held equally by all owners. If the shares of ownership are not equal, you must provide documentation as to the percentage of ownership.
- C. Multiunit Properties.** Check "Yes" if your principal residence was a unit in a multiunit property that you owned. For example, you owned a property consisting of four residential units, and you occupied one of the units as your principal residence. If the property is not a multiunit property, check "No."
- NOTE:** Residents of condominium complexes, co-ops, and continuing care retirement facilities are not considered to be living in multiunit properties and should check "No."
- D. Percentage of Occupancy.** If you answered "Yes" at Line C, enter the share (percentage) of the property used as your principal residence. For example, you

owned a four-unit property. The units are equal in size, and one of the units was your principal residence. You occupied one-fourth (25%) of the property as your principal residence. Enter 25% as your share of occupancy.

## Part II – To Be Completed by Tax Collector

Enter the appropriate amounts for calendar years 2016 and 2017 as follows:

**Line 1.** Enter the assessed value of the property for each calendar year. If the assessed value changed for the tax year, use the final assessed value.

**Line 2.** Enter the tax rate for each calendar year. Include fire and other special tax rates.

**Line 3.** Multiply the assessed value on Line 1 by the tax rate on Line 2 and enter the result on Line 3. This is the total amount of taxes due for each calendar year before any deductions and/or credits are subtracted (e.g., senior citizen's deduction, homestead benefit credit).

**Line 4.** Enter the amount of any Regional Efficiency Aid Program (REAP) credit the homeowner(s) received for each calendar year.

**Line 5.** If the applicant answered "No" to the questions at both Line A and Line C, enter the amount of property taxes from Line 3.

If the applicant answered "Yes" at either Line A or Line C, you must apportion the amount of property taxes to be entered on Line 5. If title to the property is held by the eligible applicant with others as tenants in common or joint tenants (except in the case of husband and wife or CU partners), or if the property consists of more than one unit, the applicant is only eligible for the proportionate share of the reimbursement that reflects the percentage of ownership or the percentage of occupancy.

**Multiple Owners.** If the applicant answered "Yes" at Part I, Line A, multiply the amount of property taxes on Line 3 by the percentage of ownership shown at Part I, Line B, and enter the result on Line 5.

**Multiunit Properties.** If the applicant answered "Yes" at Part I, Line C, multiply the amount of property taxes on Line 3 by the percentage of occupancy shown at Part I, Line D, and enter the result on Line 5.

If the applicant answered "Yes" to the questions at both Lines A and C in the same year, multiply the amount of property taxes on Line 3 by the percentage of occupancy shown at Part I, Line D, and enter the result on Line 5.

**Certification.** Complete the certification portion of Form PTR-1A. Sign and date the certification and place the authorization stamp in the space provided. (Use blue or black ink.)