

Department of Taxation and Finance Office of Real Property Tax Services

RP-4250-s

(4/25

Application for Homestead Exemption in the Town of Southampton

Names of owners (See Application instructions regarding	g properties held ir	n trusts or life estates.)				
Mailing address of owners (number and street - include unit number - or PO Box)		Location of property (street address; include unit number)				
City, village, or post office State	ZIP code	City, town, or village	State ZIP code			
Phone number		School district				
Email address		Property identification: Tax map nun	nber or section/block/lot (see tax bill or assessment roll)			
Names of any nonowner spouses		1				
Addresses of primary residences if different from above						
Mark an X in the applicable boxes.						
1 Are you receiving a School Tax Relief (STAR) exemption for this property?						
2 Are you receiving an Enhanced STAR credit for this property?						
3 Are you receiving the Basic STAR credit for this property?						
4 If Yes, is your income \$250,000 or less (see <i>Definition of income</i> in the instructions)?						
5 Do you own this property, is it your primary (see <i>Definition of income</i> in the instructions						
Certification I (we) certify that the above information is corresidence. I (we) understand it is my (our) of another primary residence and provide any	bligation to no	otify the Southampton As	ssessor if I (we) relocate to			
All resident owners must sign and date this t	form. Attach ac	dditional sheets, if necess	ary.			
Signature Date		Signature	Date			
Signature Date		Signature	Date			

Return this form to the Southampton Assessor by taxable status date (see Deadline). Note: The assessor may request supporting documentation to determine eligibility.

Instructions

General information

By law, the Town of Southampton in Suffolk County may adopt a local law providing a homestead exemption from town property taxes. Eligibility for this exemption is the same as for the STAR exemption pursuant to Real Property Tax Law § 425 (3). This exemption is uniform for all eligible property and **cannot** exceed \$50,000 in full assessed value.

To qualify, the home must be:

- · owner-occupied, and
- · the homeowners' primary residence.

The combined income of the owners and spouses who reside on the property must be less than or equal to \$250,000 in the tax year two years prior to the year of the exemption.

Deadline: You must file the application with the assessor on or before the *taxable status date*, which is generally March 1.

For further information, contact the Southampton Assessor's office.

Do not file this form with the New York State Department of Taxation and Finance or the Office of Real Property Tax Services.

Application instructions

Print the name and mailing address of each person who **owns** and **primarily resides** in the property. (If the title to the property is in a trust or is held in a life estate, the trust beneficiaries or life tenants are deemed to be the owners for this exemption.) There is no single factor which determines whether the property is your primary residence, but the assessor will consider factors such as voting location, automobile registrations, and the length of time you occupy the property each year. The assessor may ask you to provide proof of residency and ownership.

You can find the parcel identification number on either the assessment roll or your tax bill.

If your primary residence changes after you have been granted the exemption, you must notify the assessor.

Definition of income

Proof of income is your federal or state income tax return from two tax years prior to the year of the exemption. If you were not required to file a federal or New York State income tax return, the assessor may ask for other documentation. To determine your income eligibility, use the following table to identify line references on your federal or state income tax returns.

Form number	Title of income tax form	Income for this exemption
Federal Form 1040	U.S. Individual Income Tax Return	Adjusted gross income (line 11) minus taxable portion of IRA distributions (line 4b)
NYS Form IT-201	Resident Income Tax Return	Federal adjusted gross income (line 19) minus taxable portion of IRA distributions (line 9)

Date application received:	This Area for A	This Area for Assessor's Use Approved:		Yes No
Proof of income: Proof of residency:	Yes No Yes No			
Assessor's signature		Date		