



JACKSON COUNTY Collection Department

Kansas City, Missouri 64106
www.jacksongov.org

SeniorApplication@jacksongov.org

Jackson County Senior Property Tax Credit Program Application

Applicant Information

Name(s): _____ Date of this Application: _____
(Application Submission Due by 12/31)

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email Address: _____

Property Information

To help us process your application faster, please provide the property parcel number. (Optional)

Parcel # - - - - - - -

Address of Primary Residence (physical location of property): _____

Required Documents. Attach all documents listed below.

1. Proof of Jackson County Residency. (Examples: Utility bill, Voter Registration, Driver's license)
 Attached
2. Proof of age 62 or older. (Note: Any government issued document with Date of Birth will be accepted)
 Attached
3. Proof of Interest if applicant is not named on the account. *Attach documentation showing Applicant has legal or equitable interest in the property, such as a trust agreement or operation agreement.
 Attached



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Certification

1. I have read the statements and questions included in this Application and understand them and represent that all responses are true and accurate.
2. I am the owner of the property AND/OR I have the authority to act on behalf of the other owners and occupants of the Property.
3. I have not claimed more than one primary residence as a homestead for purposes of a property tax credit in Missouri or elsewhere.
4. I understand the County will rely on the information I provided in this Application and this Certificate is a material representation in evaluating this Application for property tax credit. I specifically certify the following:
 - a. I am a resident of Jackson County, Missouri.
 - b. I am 62 years of age or older.
 - c. I am the owner of this property or have legal or equitable interest in such property by a written document.
 - d. I am responsible for the payment of real property taxes on this property.
 - e. I occupy the property as my only primary residence.

I understand I may be charged with a Class B misdemeanor as stated in Section 575.060 RSMo if any information submitted in this application is found to be a false declaration and I am not aware of any information that would prohibit or disqualify me from receiving the tax credit for the homestead identified in this Application.

Printed Name: _____

Signature: _____

Date: _____

Parcel Number: - - - - - - -

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