

# SUPPLEMENTAL SECURITY INCOME EXEMPTION APPLICATION FORM

REQUEST FOR EXEMPTION FROM THE PARCEL TAX OWNER/OCCUPANTS RECEIVING SUPPLEMENTAL SECURITY INCOME FOR A DISABILITY

# FISCAL YEAR 2015-16 (JULY 1, 2015 TO JUNE 30, 2016)

Instructions are on back of this form.

#### **Please Print**

Assessor's Parcel Number (APN# on Property Tax bill):  Property Owner's Name(s):		
Mailing Address: (if different):		
Phone Number:		
Administration and receive Supp	ined to be totally disabled by Social Seplemental Security Income as a result.  ddress and the above information is accommodated as a second s	
Signature of Applicant or Designee  Mail or bring this application, along with necessary documentation no later than June 30, 2015 to:  Saratoga Union School District Office  Attention: Business Office  20460 Forrest Hills Drive, Saratoga CA 95070		
OFFICE USE ONLY	Approved	Disapproved
Residence Verification Driver's License Utility Bill Social Security Check Tax Bill	SSI Verification  Benefits Verification	on Letter
Verified by:	Date	

## SARATOGA UNION SCHOOL DISTRICT SUPPLEMENTAL SECURITY INCOME FOR A DISABILITY INFORMATION SHEET 2015-16

## 1. What is the parcel tax?

Each parcel owner within the Saratoga Union School District is taxed \$68 per parcel a year. This special tax money is used directly by the district to provide support to educational services throughout the District.

#### 2. What exemptions are available?

The following exemptions will be granted upon application annually:

- Senior citizen exemption
- Contiguous parcel exemption
- Supplemental Security Income for a disability exemption

## 3. How do I qualify for the Supplemental Security Income exemption?

You qualify for an exemption if you are receiving Supplemental Security Income for a disability, and you are the owner of a parcel within the Saratoga Union School District, and that parcel is your principal residence. You must own and live in your home as of July 1 of the year the tax is due.

### 4. How do I apply for an exemption?

- Complete an application form. Your Assessor's Parcel Number (APN#) can be found on your annual Tax Bill, the Notification of Assessment card, or by calling the Santa Clara County Assessor's Office, Public Services Division at (408)299-5500.
- Provide a Benefits Verification Letter issued by the Social Security Administration receiving Supplemental Income for a disability.
- Provide one of the following as verification of residency:
  - Driver's License
  - ➤ Utility Bill
  - > Social Security Check
  - Tax Bill

The completed application form must be received no later than June 30, 2015. You may mail or bring the completed application form, a Benefits Verification Letter, and proof of residency to:

Saratoga Union School District Attention: Business Office 20460 Forrest Hills Drive Saratoga, CA 95070

FOR ADDITIONAL INFORMATION, PLEASE CALL (408) 867-3424, extension 209#