Permanent New Milford residency required **on October 1**.
Application due to assessor **by December 31**.

Complete pages 1 through 2

Town of New Milford			Grand L	ist Year.		UNIQUE ID:
I am applying for homestead exemption				New	or [] Change
		Property II	nformat	ion		
Homestead address			Mailing	address, i	if different	
Is the property in a trust?	?	☐ No Name of trust on	the prop	erty deed		
		Applicant / Co-app	olicant l	nformati	on	
		Applicant			Co-ap	plicant/Spouse
Name						
Phone number						
Date of birth						
% of ownership						
Date homestead was established						
Name and address of ar	y owners	not residing on the pro	perty			
Marital status of Applica	nt	Single Married	Divorced	☐ Widowe	ed 🗌 Oth	er, Explain
Marital status of Co-appl	icant	Single Married	Divorced	Widowe	ed 🗌 Oth	er, Explain
Co-applicant relationship	to Appli	cant (Example: Spouse,	parent,	sibling)		
Do you currently claim re Applicant? \(\subseteq \text{ Yo}	-			ticut towr	or state?	?
Email Address:						
Please provide	as much i	information as possible.	Your ass	sessor wil	I make th	e final determination.
Proof of Resider	ice	Applica	ant	Co-applicant/Spouse		
Previous residency outside Milford and date terminated			date		date	
CT driver license or ID card						
CT vehicle registration (plat						
Are you registered to vote in Milford	ii New	Yes		☐ No	☐ Yes	□ No
Address on your last IRS In Tax Return	icome					
Address on your last CT Inc Tax Return	come					
Bank statement & checking mailed to homestead addre		☐ Yes ☐ No			☐ Yes	□No
Utilities (cell phone, cable, etc.) billed & mailed to the homestead address?	electric	☐ Yes ☐ No			☐ Yes	□No

I authorize the Town of New Milford to obtain information to determine eligibility for the homestead exemption. I own the property above and it's my permanent residence. I understand that pursuant to New Milford Town Ordinance Chapter 19, Article XII, §19-69, any person that knowingly and willfully gives false information to receive a homestead exemption is subject to revocation of the homestead exemption, additional tax, and interest.

I have read, or have had someone read to me, the contents of this form.

I certify all information on this form are true, correct, and in effect on October 1 of this year.

Signature, applicant	Date	Signature, co-applicant	Date

You will be notified in February 2026 of your homestead eligibility.

Penalties

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Final Determination

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Complete pages 1 through 2

Town of New Milford			Grand L	ist Year.		UNIQUE ID:
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		Property II	nformat	ion		
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Utilities (cell phone, cable, etc.) billed & mailed to the homestead address?	electric	☐ Yes ☐ No			☐ Yes	□No

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Utilities (cell phone, cable, etc.) billed & mailed to the homestead address?	electric	☐ Yes ☐ No			☐ Yes	□No

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I am applying for homestead exemption				New	or [] Change
		Property II	nformat	ion		
Homestead address			Mailing	address, i	if different	
Is the property in a trust?	?	☐ No Name of trust on	the prop	erty deed		
		Applicant / Co-app	olicant l	nformati	on	
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Name						
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Name and address of ar	y owners	not residing on the pro	perty			
Marital status of Applica	nt	Single Married	Divorced	☐ Widowe	ed 🗌 Oth	er, Explain
Marital status of Co-appl	icant	Single Married	Divorced	Widowe	ed 🗌 Oth	er, Explain
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Proof of Resider	nce	Applica	ant	Co-applicant/Spouse		
Previous residency outside Milford and date terminated			date		date	
CT driver license or ID card						
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Are you registered to vote in Milford	ii New	Yes		☐ No	☐ Yes	□ No
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Address on your last CT Ind Tax Return	come						
Bank statement & checking mailed to homestead addre		☐ Yes ☐ No			☐ Yes	□No	
Utilities (cell phone, cable, etc.) billed & mailed to the homestead address?	electric	☐ Yes ☐ No			☐ Yes	□No	

I authorize the Town of New Milford to obtain information to determine eligibility for the homestead exemption. I own the property above and it's my permanent residence. I understand that pursuant to New Milford Town Ordinance Chapter 19, Article XII, §19-69, any person that knowingly and willfully gives false information to receive a homestead exemption is subject to revocation of the homestead exemption, additional tax, and interest.

I have read, or have had someone read to me, the contents of this form.

I certify all information on this form are true, correct, and in effect on October 1 of this year.

Signature, applicant	Date	Signature, co-applicant	Date

You will be notified in February 2026 of your homestead eligibility.

Penalties

The assessor has a duty to notify the Tax Collector if you received a homestead exemption in the past that you were not entitled to. The Assessor will revoke the exemption for the Grand List years of ineligibility resulting in an additional tax due. The Collector shall then add the interest authorized by Connecticut General Statutes Section 12-145 on all unpaid, delinquent taxes retroactive to the date that the tax became due had relief not been provided and forthwith send a bill for the unpaid taxes and interest to such person. The Collector shall place a notice of lien encumbering such person's property on the land records for all delinquent additional taxes and interest. Should such person neglect or refuse to pay the additional tax and interest within 30 days of the Collector's mailing of such bill, the Town of New Milford may, in addition to and without limiting any and all other remedies that may exist, sue such person for the delinquent additional taxes and interest due as a result of the false application together with costs of suit, including a reasonable attorney's fee.

Final Determination

Permanent New Milford residency required **on October 1**.
Application due to assessor **by December 31**.

Complete pages 1 through 2

Town of New Milford			Grand L	ist Year.		UNIQUE ID:	
I am applying for homestead exemption				New	or [] Change	
	Property I	nformat	ormation				
Homestead address			Mailing	address, i	if different		
Is the property in a trust?	?	☐ No Name of trust on	the prop	erty deed			
		Applicant / Co-app	olicant l	nformati	on		
		Applicant			Co-ap	plicant/Spouse	
Name							
Phone number							
Date of birth							
% of ownership							
Date homestead was established							
Name and address of ar	y owners	not residing on the pro	perty				
Marital status of Applica	nt	Single Married	Divorced	☐ Widowe	ed 🗌 Oth	er, Explain	
Marital status of Co-applicant Single Married Divorced Widowed Other, Explain						er, Explain	
Co-applicant relationship	to Appli	cant (Example: Spouse,	parent, s	sibling)			
Do you currently claim re Applicant? \(\subseteq \text{ Yo}	-			ticut towr	n or state?	?	
Email Address:							
Please provide	as much i	information as possible.	Your ass	sessor wil	I make th	e final determination.	
Proof of Resider	nce	Applica	ant Co-			o-applicant/Spouse	
Previous residency outside Milford and date terminated			date			date	
CT driver license or ID card							
CT vehicle registration (plate Are you registered to vote in							
Milford	II INEW	Yes		☐ No	☐ Yes	□ No	
Address on your last IRS In Tax Return	icome						
Address on your last CT Ind Tax Return	come						
Bank statement & checking mailed to homestead addre		☐ Yes ☐ No			☐ Yes	□No	
Utilities (cell phone, cable, etc.) billed & mailed to the homestead address?	electric	☐ Yes ☐ No			☐ Yes	□No	

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Final Determination