



SENIOR CITIZEN/DISABLED VETERAN
PROPERTY TAX EXEMPTION APPLICATION
AS 29.45.030 (e)-(i)



1. Name of Municipality: <u>Valdez</u>	2. Property Tax I.D.: <u>7010040100</u>	3. Tax Year: <u>2023</u>
4. Name of Applicant: <u>Jeremy T. Hart</u>	5. Birth date: <u>June 1 1987</u>	
7. Name of Spouse: <u>Kelsey O. Hart</u>	8. Birth date: <u>Nov 28 1990</u>	
9. [Redacted]	10. Residential Physical Address: <u>706 Copper Dr.</u>	
11. Message Phone: [Redacted]	12. Please check one of the following: <input type="checkbox"/> I am applying as a Senior Citizen age 65 or older <input type="checkbox"/> I am applying as a widow or widower, age 60-64, of a previously qualified applicant. <input checked="" type="checkbox"/> I am applying as a Disabled Veteran	
13. Type of Dwelling: <input checked="" type="checkbox"/> single family <input type="checkbox"/> condominium <input type="checkbox"/> mobile home <input type="checkbox"/> duplex <input type="checkbox"/> other _____	14. Is this your permanent place of abode? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, permanent residential address is: _____	
15. Is your home on land you own? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, % of ownership: _____ If no, owner's name: _____		16. Is any portion of this property used for commercial or rental purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, percentage: _____ %
17. Certification: I hereby certify that the answers given on this application are true and correct to the best of my knowledge. I understand that a willful misstatement is punishable by a fine or imprisonment under AS 11.56.210.		
Date: <u>4-3-23</u>	Signature of Applicant: <u>[Signature]</u>	

Following is for Local Assessor/Clerk Use Only

<input type="checkbox"/> New Filing	<input type="checkbox"/> Prior Filing	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Proof Provided: <input type="checkbox"/> Age <input type="checkbox"/> Disability (DAV)		Verified By: _____	
Parcel Number and/or Legal Description: _____			
Comments: _____			
Property Value	Land	Building	Total
Secondary lots			
Adjustments:			
Ownership	% _____		
Commercial/Rental	% _____		
		Subtotal:	\$ _____
		If Subtotal exceeds \$150,000, use this figure:	\$ 150,000
Borough	SC/DAV Exempt Value	Tax Code Area	Mill Rate
City			
		Total SC/DAV Exempt	Tax Amount \$ _____

Received

APR 04 2023

City of Valdez

USA North to the Future
DRIVER LICENSE

DL

11/05/2021 06/01/2029

FEDERAL
LIMITS
APPLY

HURT
2. First & middle name
JEREMY TERRIL

15 Sex M 16 eyes BRO
16 Hgt 6'403" 17 Wgt 240 lb

9. Class D
9a End
12 Rest

53:503211105LJA-0



November 7, 2019

JEREMY HURT

We made a decision on your VA benefits.

Dear Jeremy Hurt:

This letter will guide you through the information you should know and steps you may take now that VA has made a decision about your benefits.

Your Benefit Information:

- Service connection for painful surgical back scar is granted with an evaluation of 10 percent effective May 22, 2019.
- Service connection for deviated nasal septum is denied.
- Service connection for right lower extremity radiculopathy (sciatic) is granted with an evaluation of 20 percent effective May 22, 2019.
- Service connection for left shoulder strain is granted with an evaluation of 20 percent effective May 22, 2019.
- Service connection for obstructive sleep apnea as secondary to deviated nasal septum is denied.
- Service connection for surgical back scar is granted with an evaluation of 0 percent effective May 22, 2019.
- Service connection for right lower extremity radiculopathy (femoral) is granted with an evaluation of 20 percent effective May 22, 2019.
- Service connection for tinnitus is granted with an evaluation of 10 percent effective May 22, 2019.
- Service connection for herniated discs with impingement, lumbar degenerative disc disease, intervertebral disc syndrome, spinal stenosis is granted with an evaluation of 20 percent effective May 22, 2019.

Your combined rating evaluation is 70%.

How VA Combines Percentages

If you have more than one condition, VA will combine percentages to

We have included with this letter:

1. Explanation of Payment
2. Additional Benefits
3. Where to Send Written Correspondence
4. VA Form 20-0998
5. Rating Decision

Contact information:

Web: www.vets.gov
Phone: 1-800-827-1000
TDD: 711
To send questions online: visit
<https://iris.custhelp.com/>

Social Media:

Twitter: @VAVetBenefits
Facebook: www.facebook.com/VeteransBenefits

Your representative:

You appointed TEXAS VETERANS COMMISSION as your accredited representative. They have also received a copy of this letter.

They can help you with any questions you have about your claim.

If you or someone you know is in crisis, call the Veterans Crisis Line at 1-800-273-8255 and press 1.



I, Jeremy Hurt recently purchased this home as of March 28 2023. I am applying for my Veterans Tax exemption as I am 70% disabled. I am applying late because of these circumstances and I noticed the city still had senior citizen exemptions on the agenda for 4/4/23 to be looked over and approved so I am also hoping to be approved as well.

4/6/23
2023 Late
File. Pending
Council approval.