

## Volunteer Fire and Emergency Services Property Tax Exemption Application

Parcel # (If Known)		_Tax Year:
Applicant Name _		
Mailing Address:	PO Box Petersburg, Alaska 9983	3
Residence Address:		
Home Phone: 772	Work Phone: 772	Cell phone
Type of Dwelling: [ ]	Single Family [ ] Condo [ ] Du	plex [ ] Mobile Home [ ] Other
Is this your permanent	place of abode/residence? [ ]	] yes [] no
purposes? [] yes [	] no	is used for business
correct to the best of my from receiving this exer which may affect my ex	knowledge. I understand that nption. I will notify the Petersl	rs given on this application are true and a willful misstatement may disqualify me burg Borough immediately of any change not limited to being out of state for more oplicant's parcel ownership.
DATE	SIGNATURE OF APPLICANT	·
*	viewed by the Fire and Emerg eet the all qualifications for this	gency Services Manager and the Finance exemption.
Signature of Fire/EMS I	Manager:	Date:

To be eligible for tax exemption under AS 29.45.030(e) a claimant must file this application no later than February 15<sup>th</sup> of the tax year in which the exemption is sought.