



TOWN OF DALTON FISCAL YEAR 23 SENIOR TAX WORK OFF PROGRAM APPLICATION PART 1

Date of application: _____

NAME _____			DOB: _____
LAST	FIRST	MIDDLE INITIAL	
ADDRESS: _____			

PHONE: _____		E-MAIL: _____	

Please check all experience/skills, either through past jobs or other volunteer experiences that you have and are willing to apply to a Town placement:

Office work _____	Computer skills _____
Data Entry _____	Customer Service Experience _____
Phone answering _____	File Management _____
Xeroxing/collating _____	Bookkeeping _____
Yard work _____	Light Maintenance _____
Shelving Books _____	Other _____

Please provide three professional references: (note: relatives may not be listed)

1. _____	_____	_____
First & Last name	Phone Number	Affiliation
2. _____	_____	_____
First & Last name	Phone Number	Affiliation
3. _____	_____	_____
First & Last name	Phone Number	Affiliation

Do you have any physical limitations that need to be considered in placing you in a volunteer position? _____

Please read the following statement. If you agree, sign below and enter the date:

I understand that only the hours worked from January 1, 2022 through November 30, 2022 will be eligible for the FY '23 tax abatement. I understand that I will receive up to \$1,000.00 to be applied against my Town of Dalton residential property tax. As a volunteer for the Town of Dalton, I agree to abide by all Town's rules and regulations.

Signature: _____ Date: _____



TOWN OF DALTON FISCAL YEAR 23 SENIOR TAX WORK OFF PROGRAM
 APPLICATION PART II
 CONFIDENTIAL FINANCIAL DATE SHEET

Date of Application: _____

NAME _____ DOB: _____
LAST FIRST MIDDLE INITIAL
 LEGAL ADDRESS _____

 PHONE: _____ E-MAIL: _____

GROSS RECEIPTS FROM ALL SOURCES OF PRECEDING CALENDAR YEAR: Complete this section.

	Applicant & Spouse	Co-owner(s) & Spouse(s)
Retirement Benefits (Social Security, Railroad, Federal, MA & Political Subdivisions).....		
Other pensions and Retirement Allowances.....		
Wages, Salaries and other Compensations.....		
Net Profits From Business, Profession or Property Rental.....		
Interest & Dividends.....		
Other Receipts (Capital Gains, Public Assistance, Etc.).....		
Totals		

VALUE OF ALL PROPERTY OWNED ON JULY 1 THIS YEAR. Complete this section.

Real Estate:	Assessed Valuation	Mortgage	Value
Domicile _____	_____	_____	_____
Other _____	_____	_____	_____
Personal Estate			
Bank Accounts: Name & Address of Bank			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



TOWN OF DALTON FISCAL YEAR 23 SENIOR TAX WORK OFF PROGRAM
APPLICATION PART II

CONFIDENTIAL FINANCIAL DATE SHEET CONTINUED

Personal Estate continued:

Stocks, Bonds, Securities, etc.: Description & Amount

_____	_____
_____	_____

Motor Vehicles & Trailers: & Year, Make and Model

_____	_____
_____	_____

Other Non-exempt Personal Property: Kind & Description

_____	_____
_____	_____

By signing this form I certify that the information above is accurate to the best of my knowledge. I understand that if I qualify for this program on the basis of this application, I will be required to send documentation of the above statements to the Board of Assessor's Office prior to any assignment.

I further understand that submission of this information does not guarantee an assignment in this program. Final assignments will be determined by lottery of all qualified applicants.

Signature: _____ Date _____

**Incomplete applications will not be considered
No work will be compensated prior to program acceptance**

Please return completed application to:

**Office of the Board of Assessors
Senior Tax Work Off Program
462 Main Street
Dalton, MA 01226**