

# Callaway County Senior Real Estate Property Tax Relief Program

2024 Base Year Application      **The 2025 application completed in its entirety and required documents are due by May 31<sup>st</sup>, 2025.**

Applicant Name(s): \_\_\_\_\_ ; \_\_\_\_\_

Date of Birth: \_\_\_\_\_ ; \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parcel Number: \_\_\_\_\_ \*Can be found on real estate property tax bill and/or receipt.

Property Address: \_\_\_\_\_

Owner of Record: \_\_\_\_\_ \*As recorded in the Recorder of Deeds' office.

Ownership Type:     Individual/Joint     Other Entity    If Other Entity selected, attach trust agreement, operating agreement, etc.

Yes     No    Was the applicant 62 or older before January 1<sup>st</sup>, 2025?

Yes     No    Does the applicant occupy the property as their primary residence?

Yes     No    Does the parcel include more than 10 acres?

Yes     No    Does the parcel include more than one structure that serves as a dwelling unit?

Yes     No    Have any improvements or additions been made to the property in the past year?

## REQUIRED DOCUMENTS

### **Proof of Identity and Age**

Include one of the following:  
Government-issued identification,  
such as, Driver's License, Birth  
Certificate, Passport, etc.

### **Proof of Missouri Residency**

Include one of the following:  
Driver's License, Voter Registration Card,  
state-issued nondriver identification, etc.

OFFICE USE ONLY

Proof of Identity & Age: Y    N    DL    BC    P                      Proof of MO Residency: Y    N    DL    VR    MO ID

Collector Approval \_\_\_\_\_ Date \_\_\_\_\_

CERTIFICATION

1. I have read the statements and questions included in this application and understand them and certify that all responses are true and accurate.
2. I have the authority to act on behalf of the owners and occupants of the Property, and I have not claimed more than one primary residence as a homestead for the purpose of a property tax credit in Missouri or elsewhere.
3. I understand the County will rely on the information provided by the Applicant in this Application and this Certification is a material representation in evaluating this application for property tax credit.

I specifically certify the following:

- a. I am a resident of the State of Missouri.
- b. I was over the age of 62 before January 1st of this year.
- c. I am the owner of record of the homestead for which I am seeking a property tax credit or have legal or equitable interest in such property by written instrument.
- d. I am liable for the payment of real property taxes on such homestead.
- e. I occupy the homestead as my primary residence for which I am seeking the Callaway County Senior Real Estate Tax Relief credit.

I understand I may be charged with a Class A misdemeanor as stated in Section 575.050 RSMo if any information submitted in this application is found to be a false declaration and I am not aware of any information that would prohibit or disqualify me from receiving the tax credit for the homestead identified in this Application.

SIGN BELOW IN THE PRESENCE OF A NOTARY PUBLIC

**Applicant Signature** \_\_\_\_\_ **Applicant Name(printed)** \_\_\_\_\_

STATE OF MISSOURI  
COUNTY OF CALLAWAY

**SUBSCRIBED** and sworn before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_ **Applicant Name(printed)** \_\_\_\_\_

STATE OF MISSOURI  
COUNTY OF CALLAWAY

**SUBSCRIBED** and sworn before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

**SUBMIT COMPLETED AND NOTORIZED APPLICATION AND REQUIRED DOCUMENTS TO:  
CALLAWAY COUNTY COLLECTOR  
10 EAST 5<sup>TH</sup> ST.**

**FULTON, MO 65251**

**573-642-0747 FOR ANY QUESTIONS**

**\* WE HAVE A NOTARY ON STAFF\***