

**CITY OF PAYNESVILLE
APPLICATION FOR DEFERMENT**

I, _____, hereby apply for deferment of a special assessment under Chapter 26 – 7, Letter (i) of the City Code of the City of Paynesville.

I understand that income for purposes of this application includes all money coming into my household to all members of my immediate family, including, but not limited to wages, pensions, social security, interest, rent, unemployment benefits, disability payments or any similar monies.

1. My total income from all sources for the year _____ was \$ _____.
My total income from all sources for the year _____ was \$ _____.
Upon request I will provide a copy of my tax return, together with the tax return of any other members of my household, for either or both of these years stated above for review by a representative of the City of Paynesville.
2. My date of birth is _____.
3. I (am) (am not) (*circle one*) retired by virtue of permanent and total disability.
4. I am the owner of a parcel of real estate located at _____,
Paynesville, Minnesota.
5. I am occupying the property located at _____,
Paynesville, Minnesota, as my principal residence.

The option to defer the payment of special assessments shall terminate and all amounts accumulated plus applicable interest, shall become due upon the occurrence of any of the following events: (a) the death of the owner, provided that the spouse is otherwise not eligible for the benefits hereunder; (b) the sale, transfer or subdivision of the property or any part thereof; (c) if the property should for any reason lose its homestead status; or (d) if for any reason the taxing authority deferring the payment shall determine that there would be no hardship to require immediate partial payment. When deferment of the special assessment has been granted and is subsequently terminated for any reason provided in the law and ordinance, all amounts accumulated plus applicable interest become due.

I hereby agree that I will notify the City of Paynesville of any changes in my status which affects my eligibility for deferment of the special assessment against my property.

I SWEAR UNDER PENALTY OF PERJURY THAT THE ABOVE IS TRUE AND CORRECT.

(Signature)

(Date)

STATE OF MINNESOTA)
 :SS
COUNTY OF STEARNS)

Subscribed and sworn to before me this

_____ day of _____, _____.

Notary Public