

# Maine Residents Property Tax and Rent Refund Application

For Property Tax Assessed in 2006 or  
 Rent Paid during 2006



STEP 1 Print Neatly in Blue or Black Ink, Using Upper Case Letters	Your First Name		MI	Your Last Name		
	Spouse's First Name		MI	Spouse's Last Name		
	Mailing Address (PO Box, number, street and apt. no)					
	City		State	Zip Code		

If applicant named above died during 2006, 2007 or 2008, enter date of death: ..... → \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 (Month) (Day) (Year)

If spouse died during 2006, 2007 or 2008, enter date of death: ..... → \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 (Month) (Day) (Year)

**IMPORTANT!**  
 You must enter your SSN(s) and date(s) of birth below.

Your Social Security Number  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Your Date of Birth  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Spouse's Social Security Number  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Spouse's Date of Birth  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Your Telephone Number  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**BE SURE TO ANSWER "Yes" or "No" to each question.**  
**YOUR REFUND WILL BE DELAYED IF YOUR APPLICATION IS NOT COMPLETE.**

STEP 2 Answer Each Question		Yes	No
1a.	Do you receive <u>any</u> federal disability payments such as social security disability benefits or supplemental security income disability benefits? .....	<input type="checkbox"/>	<input type="checkbox"/>
1b.	Does your spouse receive <u>any</u> federal disability payments such as social security disability benefits or supplemental security income disability benefits? .....	<input type="checkbox"/>	<input type="checkbox"/>
1c.	Were you a Maine resident for all of 2006? .....	<input type="checkbox"/>	<input type="checkbox"/>
1d.	Did you own a home or rent an apartment in Maine for all of 2006 and live in your home or apartment for at least 6 months of 2006? .....	<input type="checkbox"/>	<input type="checkbox"/>
1e.	Whether you owned or rented your home, did you rent part of your home to others or use part of it for a business? .....	<input type="checkbox"/>	<input type="checkbox"/>

2. Physical location of property where you lived during 2006 (if different from mailing address above): \_\_\_\_\_  
 If you paid rent in 2006, list your landlord's name and telephone number: \_\_\_\_\_

**3. Dependents. How many dependents do you have (DO NOT INCLUDE YOU OR YOUR SPOUSE)?** ..... \_\_\_\_\_  
 List your dependents below. If you have more than 2 dependents, list them on a separate sheet of paper.

STEP 3 Enter Your Dependents	Dependent's First Name	Dependent's Social Security Number	3a. Does this dependent receive <u>any</u> federal disability payments such as social security disability benefits or supplemental security income disability benefits? .....	Yes	No
	_____	_____ - _____ - _____		<input type="checkbox"/>	<input type="checkbox"/>
	Dependent's Last Name	Dependent's Date of Birth			
	_____	_____ - _____ - _____			
	Dependent's First Name	Dependent's Social Security Number	3b. Does this dependent receive <u>any</u> federal disability payments such as social security disability benefits or supplemental security income disability benefits? .....	Yes	No
	_____	_____ - _____ - _____		<input type="checkbox"/>	<input type="checkbox"/>
	Dependent's Last Name	Dependent's Date of Birth			
	_____	_____ - _____ - _____			

**STEP 4**  
 Enter your Property Tax or Rent

4. Enter property tax assessed on your home in 2006 (See instructions on pages 6 and 7) .....4. \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
 (If your property tax bill is more than \$3,000, attach the copy of the tax bill that has your name on it.)

a. Was your home on a rented lot? .....4a.  Yes  No

5. Enter total rent you paid on your home or lot in 2006 (Do not include mortgage payments) .....5. \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
 (If your rent is over \$9,000, attach copies of your rent receipts.)

a. Does the rent on line 5 include heat? .....5a.  Yes  No

b. Was your rent reduced or paid in part by the government? .....5b.  Yes  No

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This application must be filed no later than June 2, 2008

**STEP 5**  
Annual Household Income

**6. ANNUAL HOUSEHOLD INCOME FOR 2006 (Total amount for Applicant, Spouse, and Dependents)**

a. Maine adjusted gross income (total for all household members. See instructions) ..... **6a. \$** \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
**Note: If no member of the household filed a 2006 Maine income tax return, leave this line blank and go to line 6c.**

b. Loss Add-Back (see instructions on page 7) ..... **6b. \$** \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

c. **Additional income not included on line 6a above** (See instructions on pages 7 through 9)

(1) Salaries, Wages ..... \_\_\_\_\_

(2) Dividends, Interest - all sources ..... \_\_\_\_\_

(3) Social Security, Railroad Retirement, Annuities, Pensions,  
 Veterans Compensation, ROTH IRAs ..... \_\_\_\_\_

(4) Pension Income Deduction claimed on your Maine income tax return ... \_\_\_\_\_

(5) Deferred Compensation and Employee Contributions to Pension,  
 Annuity or Retirement Plans ..... \_\_\_\_\_

(6) Cash Public Assistance, TANF ..... \_\_\_\_\_

(7) Child Support Payments ..... \_\_\_\_\_

(8) State Supplemental Income (**This is not social security income**) ..... \_\_\_\_\_

(9) Any other income (see pages 8 and 9 for types of income to list) ..... \_\_\_\_\_

**Add lines (1) through (9) above** ..... **6c. \$** \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

d. Add lines 6a, 6b and 6c ..... **6d. \$** \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

e. Rollovers of IRA, Pension, or Annuities and Property Tax Program Refunds only if included  
 on line 6a above. (**See instructions on page 9** before entering an amount on this line.) .. **6e. \$** \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

f. Total household income (subtract line 6e from line 6d) ..... **6f. \$** \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

**STEP 6**  
Direct Deposit

**7. Direct Deposit Information** — If you want your refund sent directly to your bank account, see instructions on page 9 and fill in the blocks below.

7a. Routing Number: \_\_\_\_\_

7b. Account Number: \_\_\_\_\_

7c. Type of Account:  Checking  Savings

**STEP 7**  
Third Party Designee

**8. Third Party Designee (see instructions on page 9):** Do you want to allow another person to discuss this return with Maine Revenue Services? .....  **Yes** (complete the following).  **No.**

Designee's name: \_\_\_\_\_ Phone number: \_\_\_\_\_ 5-digit Personal identification number:

**Under penalties of perjury, I declare that I have examined this application and to the best of my knowledge and belief, it is true, correct, and complete. Applications may be audited either before or after refunds are issued.** Refunds may be applied to other outstanding government debts you may owe.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ Signature of Preparer other than Applicant \_\_\_\_\_ Date \_\_\_\_\_

If you I-File your application, you will receive a 9-digit confirmation number after you have successfully completed the application process. You must write this number below and **keep this application for your records**. It is proof that you filed an application.

**CONFIRMATION NUMBER:**

**NOTE:** If you **do not** I-file, leave this information blank and mail this application to Maine Revenue Services in the envelope provided.

Mail your application in the envelope provided.  
 Maine Revenue Services, PO Box 9116, Augusta, ME 04332-9116

**Office Use only:**  TB  FR