

2024
PAS-1



State of New Jersey
Application for Property Tax Relief
For Seniors and Social Security Disability Recipients

If you are married or in a civil union, you must provide information for both spouses/civil union partners, unless you maintain separate main homes.

Your Social Security Number

Spouse's/CU Partner's Social Security Number

County/Municipality Code (See Table pages 13)

Last Name, First Name and Initial (Joint filers enter first name and middle initial of each – Enter spouse/CU partner last name ONLY if different)

Home Address (Number and Street, including apartment number or rural route)

City, Town, Post Office

State

ZIP Code

Enter the address of your main home on October 1, 2024, if different from the address above.

Street Address: _____

County/Municipality Code: _____

This is a combined application for the Property Tax Reimbursement (Senior Freeze), ANCHOR Benefit, and Stay NJ programs. The application collects information that the Division of Taxation needs to assess your eligibility for these property tax relief programs. We will determine the benefit(s) you are eligible to receive and issue payments accordingly.

Complete this application ONLY if:

- You or your spouse/CU partner were 65 or older on December 31, 2024, **OR**
- You or your spouse/CU partner were receiving Social Security Disability benefits on December 31, 2023, **and** December 31, 2024.

Filing Status

1. Your Filing Status from your 2024 NJ-1040:

- ☐ A. Single
- ☐ B. Head of Household
- ☐ C. Qualifying Widow(er)/Surviving CU Partner
- ☐ D. Married/CU Couple, filing joint return

Married/CU Partner, filing separately:

- ☐ E. Each maintains **separate** residence
- ☐ F. Both maintain **same** residence

Age and Disability Status (Fill in all ovals that apply)

2. Your Birth Year

Your Spouse's/CU Partner's Birth Year

3a. On or before December 31, 2023, were you actually receiving federal Social Security disability benefit payments?

Yourself

Spouse/CU Partner

☐ Yes

☐ No

☐ Yes

☐ No

3b. On or before December 31, 2024, were you actually receiving federal Social Security disability benefit payments?

Yourself

Spouse/CU Partner

☐ Yes

☐ No

☐ Yes

☐ No

Residency Information

4a. Did you own (or rent) and live in the same principal residence (main home) in New Jersey from **January 1, 2024, through December 31, 2024**? (See instructions.) If "Yes," complete line 4b. If "No," continue with line 5a.

☐ Yes

☐ No

4b. Indicate your residency status for all 2024 and continue with the appropriate schedule. Do not complete lines 5a and 5b.

☐ Homeowner (complete Schedule I)

☐ Mobile home owner (complete Schedule II)

☐ Renter (complete Signature section)

5a. If you answered "No" at line 4a, did you own (or rent) your main home in New Jersey on **October 1, 2024**? If "Yes," complete line 5b. If "No," STOP. You are not eligible for property tax relief benefits. Do not file this application.

☐ Yes

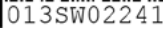
☐ No

5b. Indicate your residency status on October 1, 2024.

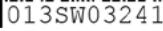
☐ Homeowner (complete Schedule III)

☐ Mobile home owner (complete Signature section)

☐ Renter (complete Signature section)



- | | 2023 | 2024 |
|---|--|--|
| 20a. Did you share site fees with anyone (other than your spouse/CU partner) who occupied the mobile home that was your main home on December 31? | <input type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input type="radio"/> No |
| 20b. If you answered "Yes," indicate your share (percentage) of the mobile home park site fees | <div> <div></div> <div></div> <div>%</div> </div> | <div> <div></div> <div></div> <div>%</div> </div> |



Your Social Security Number

Division Use