



# Application for Corrected Tax Roll

### Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners <u>Loring R. Moak, Paul L. Moak, Samantha L. Moak</u>					
Mailing address of owners (number and street or PO box) <u>271 Hale Rd.</u>			Location of property (street address) <u>285 Hale Rd.</u>		
City, village, or post office <u>Rensselaerville</u>		State <u>N.Y.</u>	ZIP code <u>12147</u>	City, town, or village <u>Rensselaerville</u>	
Daytime contact number <u>518 239 6829</u>		Evening contact number <u>518 239 6829</u>		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) <u>149.-1-4.1</u>	
Account number (as appears on tax bill)			Amount of taxes currently billed <u>1605.57</u>		
Reasons for requesting a correction to tax roll: <u>Homings over 65 (senior) Exemption was not Deducted (not applied)</u>					

I hereby request a correction of tax levied by Rensselaerville for the year(s) 2020.  
(County, city, village, etc.)

Signature of applicant 	Date <u>1/13/2020</u>
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### Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>1/17/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation <b>Approve application</b> <input checked="" type="checkbox"/> <b>Deny application</b> <input type="checkbox"/>
Signature of official 	Date <u>1/30/20</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Rensselaerville who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

### Part 3 – For use by the tax levying body or official designated by resolution \_\_\_\_\_ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error  Error in essential fact  Unlawful Entry

Amount of taxes currently billed \$ <u>1,605.77</u>	Corrected tax \$ <u>856.43</u>
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): \_\_\_\_\_

Signature of chief executive officer, or official designated by resolution	Date
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Peter Hotaling./Sole Assessor  
Town of Rensselaerville  
87 Barger Rd  
Medusa, NY 12120  
assessors@rensselaerville.com

# Town of Rensselaerville Assessor's Office

January 15, 2020

Director Maggie Alix  
Albany County Office Of Real Property  
112 State Street Room 800  
Albany, NY 12207

Re: Lorning Moak  
285 Hale Rd  
Rensselaerville, NY 12147  
149.-1-4.1

Dear Maggie, I received a call from Mr. Moak questioning why there was not a Sr Aged Exemption on his 2020 Tax bill for County and Town purposes.

Upon review I found that, all exemptions were removed when the sale was entered. The sale was actually was to put the ownership in a Family Trust and Mr Moak should have retain his exemptions. I request that the RP-554 be processed without penalties and a new tax bill be sent to Mr. Moak at mailing address 271 Hale Rd. Rensselaerville, NY 12147.

I have enclosed 2 copies of the RP-554, copy of the unpaid 2020 Town Tax Bill, RPS snap shot showing the Exemptions in place, and a copy of the Sr Aged Exemption form. Mr Moak did receive the E STAR Exp for the 2019 School Bill.

Should you have any questions please feel free to call me at 518-239-4225 or my cell 518-573-7852 , for now as I am working from home during my recuperation from surgery.

Sincerely yours,

Peter Hotaling IAO  
Town of Rensselaerville  
Sole Assessor

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**TOWN OF RENSSELAERVILLE: TOWN & COUNTY 2020 TAXES**

FISCAL YEAR: 01/01/2020 to 12/31/2020	WARRANT DATE: 12/31/2019	STATE AID - COUNTY: \$91,269,848.00	TOWN: \$0.00
<b>MAKE CHECK PAYABLE TO:</b>	<b>BANK</b>	<b>BILL NUMBER</b>	<b>PAGE</b>
		001138	1 OF 1

**VICTORIA H. KRAKER**  
**TOWN CLERK/TAX COLLECTOR**  
**87 BARGER ROAD**  
**MEDUSA, NY 12120**

**TO PAY IN PERSON:**  
 Town Hall  
 Monday - Wednesday  
 9:00 AM - 3:30 PM  
 Thursday 9:00 AM - 6:30 PM  
 Friday 9:00 AM - 1:00 PM

**PROPERTY INFORMATION:**  
**TAX MAP #:013600 149.-1-4.1**  
 DIMENSION: 85.10 acres  
 RS: 1 CLASS: Rurl res&rec  
 ADDRESS: 285 Hale Rd  
 SCHOOL: Greenville Central  
 FULL MARKET VALUE: 176053.00  
 UNIFORM % OF VALUE: 57.00  
 ASSESSMENT: 100350

**PROPERTY OWNER:**

Moak Paul L.  
 Moak Samantha L.  
 271 Hale Road  
 Rensselaerville, NY 12147

**MEMORANDUM BILL**

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill.

LEVY DESCRIPTION	TAX LEVY	% Change From Prior YR Levy	RATE	TAXABLE VALUE	AMOUNT DUE
TOWN	392003	5.1000	2.87836700	50,175 100350.00	144.42 288.84
HIGHWAY 1	479861	-14.5000	3.52348400	50,175 100350.00	176.79 353.58
HIGHWAY 2,3,4	315622	45.1000	2.31752300	50,175 100350.00	116.28 232.56
COUNTY	832707	4.1000	6.21113700	50,175 100350.00	311.64 623.29
RENSSELAERVILLE FIRE	62202	1.1000	1.06928000	100350.00	107.30

**TOTAL TAXES DUE BY JANUARY 31, 2020: \$1605.57**  
 \$ 856.43

**PAYMENT PERIODS**

From:	To:	Tax Amount:	Penalty:	Notice Fee:	Total Due:	Amount Paid:	Date Paid:
JAN 1	JAN 31, 2020	1605.57			1605.57		
FEB 1	FEB 29, 2020	1605.57	16.06		1621.63		
MAR 1	MAR 31, 2020	1605.57	32.11		1637.68		

<b>TOTAL TAXES PAID TO DATE: \$0.00</b>	<b>REMAINING TAXES DUE EXCLUDING ANY INTEREST OR PENALTY: \$1605.57</b>
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\$ 856.43

**TOWN OF RENSSELAERVILLE: TOWN & COUNTY 2020 TAXES  
 RECEIVERS STUB**

013600 149.-1-4.1  
 Moak Paul L.  
 Moak Samantha L.  
 271 Hale Road  
 Rensselaerville, NY 12147

**BILL NO.:** 001138  
**BANK:**  
**MUNICIPALITY:** Town of Rensselaerville  
**SCHOOL:** Greenville Central  
**PROPERTY ADDRESS:**  
 285 Hale Rd

<b>TOTAL TAXES PAID TO DATE: \$0.00</b>	<b>REMAINING TAXES DUE EXCLUDING ANY INTEREST OR PENALTY: \$1605.57</b>
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PLEASE RETURN ENTIRE BILL WITH YOUR PAYMENT  CHECK THIS BOX IF YOU WOULD LIKE A RECEIPT

2/12/19 M... dlc

### Renewal Application for Partial Tax Exemption for Real Property of Senior Citizens

<b>Return no later than</b> 3/1/2019	<b>to:</b> Town of Rensselaerville Assessor's 87 Barger Rd. Medusa New York 12120-	Town of Rensselaerville 518-239-4225
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Moak Paul L.  
Moak, Samantha L.  
271 Hale Road  
Rensselaerville, NY 12147

Owner Telephone number	
Day ( )	_____
Evening ( )	_____
E-mail Address (optional)	_____

#### Location of property

285 Hale Rd _____ Street address Rensselaerville _____ City / Town	_____ Village (if any) Greenville Central _____ School district
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To be filed with your local assessor by taxable status date.

Do not file this form with the Office of Real Property Tax Services.

**New for 2019. This form no longer serves as the application for the Enhanced STAR exemption** This form may only be used to apply for the partial tax exemption for real property of senior citizens. It may not be used to apply for the Enhanced STAR exemption, which is a separate exemption.

**To apply for the Enhanced STAR exemption, you must file Forms RP-425-E, Application for Enhanced STAR Exemption for the 2019-2020 School Year, and RP-425-IVP, Supplement to Forms RP-425-E and RP-425-Rnw, with your assessor by taxable status date.** You may obtain those forms from your assessor or download them from [www.tax.ny.gov](http://www.tax.ny.gov). **Note:** If you do not already have a STAR exemption you may not apply for a new STAR exemption, but you may be eligible for a STAR credit, which is provided in the form of a check. For more information about the STAR credit, visit [www.tax.ny.gov/STAR](http://www.tax.ny.gov/STAR) or call 518-457-2036.

**1** Property identification (see tax bill or assessment roll)

Tax map number or section/block/lot 149.-1-4.1

**2** Since filing your application last year, fully describe in the lines below any changes in:

- a title to the property (due to death, addition or deletion of owner);
- b legal residence or occupancy of the property (e.g. confinement of owner in hospital or nursing home, divorce, legal separation or abandonment by spouse); or
- c use of residence for other than residential purposes (store, office, farm, etc.).
- d Children of owners, tenants or leaseholders living on the premises attending public school grades pre-K-12; if so, give the name and location of the school or schools, and state whether such child or children were brought into the property in whole or in substantial part for the purpose of attending a particular school within the school district.

Mark an **X** in the box if there has been no change in items, a, b, c, and d above.

Explanation of changes that have occurred as indicated on line 2 (attach additional sheets if necessary).

Marian Moak Passed Away 2/28/18 I sold the property to my son Paul & His  
Wife Samantha thru a living trust on August 7 2018

**3** Did the owner or spouse file a federal or New York State income tax return for the preceding year?

If Yes, attach a copy of the return(s).....  Yes  No

**4** Provide the income of each owner and spouse of each owner for the calendar year immediately preceding the date of application, except for an owner who is absent from the residence due to divorce, legal separation or abandonment. Attach additional sheets if necessary. See Form RP-467-I, Instructions for Form RP-467, for income to be included.

Income does **not** include:

- gifts,
- inheritances,
- a return of capital,
- proceeds of a reverse mortgage (although interest or dividends realized from the investment of such proceeds are income),
- reparation payments to victims of Nazi persecution, or monies earned through employment in the Federal Foster Grandparent Program.

Name of Owner(s)	Source of Income	Amount of Income
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>4a Total</b> income of owner(s) .....		<b>4a</b> _____

Name of spouse(s) if not owner of property	Source of Income of spouse(s)	Amount of Income of spouse(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____

**4b Total** income of spouse(s) ..... **4b** \_\_\_\_\_

**4c Total** income of owner(s) and spouse(s) (add all income sources) ..... **4c** \_\_\_\_\_

**4d** Of the income on line 4c, how much, if any, was used to pay for an owner's care in a residential health care facility? Attach proof of amount paid; enter 0 if not applicable (see instructions) ..... **4d** \_\_\_\_\_

**4e** Subtract line 4d from line 4c..... **4e** \_\_\_\_\_

**5** If a deduction for unreimbursed medical and prescription drug expenses is authorized by any of the municipalities in which property is located (contact assessor for information), complete the following:

**5a** Unreimbursed medical and prescription drug costs (be sure to deduct any amounts reimbursed by insurance)..... **5a** \_\_\_\_\_

**5b Subtotal** income of owner(s) and spouse(s) (line 4e minus line 5a) ..... **5b** \_\_\_\_\_

**6** If a deduction for veteran's disability compensation is authorized by any of the municipalities in which the property is located, complete the following: Veteran's disability compensation received. Attach proof; enter 0 if not applicable.... **6** \_\_\_\_\_

**7 Total** income of owner(s) and spouse(s) (line 5b subtotal minus line 6) ..... **7** \_\_\_\_\_

**8 Certification**  
 I (we) certify that all statements made on this application are true and correct to the best of my (our) belief. I (we) understand that any willful false statement of material fact will be grounds for disqualification from further exemption for a period of five years, and a fine of not more than \$100.

<b>Signature</b> (If more than one owner, all must sign.) <u>Loring R. Moak</u>	<b>Marital Status</b> <u>WIDOWER</u>	<b>Phone Number</b> <u>578-239-4915</u>	<b>Date</b> <u>9/14/19</u>
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**This Area for Assessor's Use Only**

Date renewal application filed \_\_\_\_\_ Approved  Disapproved

Exemption applies to taxes levied by or for: City/Town \_\_\_\_\_%  County \_\_\_\_\_%   
 School \_\_\_\_\_%  Village \_\_\_\_\_%

Assessor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Your first name and initial <b>LORING</b>		Last name <b>MOAK</b>		OMB No. 1545-0074
If a joint return, spouse's first name and initial <b>MARIAN</b>		Last name <b>MOAK</b>		Your social security number <b>[REDACTED]</b>
Home address (number and street). If you have a P.O. box, see instructions. <b>285 HALE RD</b>		Apt. no.		Spouse's social security number <b>[REDACTED]</b>
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>RENSSELAERVILLE NY 12147</b>				▲ Make sure the SSN(s) above and on line 6c are correct.  Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
Foreign country name		Foreign province/state/country		

**Filing status** Check only one box.

1  Single  
 2  Married filing jointly (even if only one had income)  
 3  Married filing separately. Enter spouse's SSN above and full name here. ▶  
 4  Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶  
 5  Qualifying widow(er) (see instructions)

**Exemptions**

6a  Yourself. If someone can claim you as a dependent, do not check box 6a.

b  Spouse

(1) First name		Last name		(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

d Total number of exemptions claimed. Boxes checked on 6a and 6b: **2**  
No. of children on 6c who:  
• lived with you  
• did not live with you due to divorce or separation (see instructions)  
Dependents on 6c not entered above  
Add numbers on lines above ▶ **2**

**Income**

<b>7</b> Wages, salaries, tips, etc. Attach Form(s) W-2.	<b>7</b>
<b>8a</b> Taxable interest. Attach Schedule B if required.	<b>8a</b>
<b>b</b> Tax-exempt interest. Do not include on line 8a.	<b>8b</b>
<b>9a</b> Ordinary dividends. Attach Schedule B if required.	<b>9a</b>
<b>b</b> Qualified dividends (see instructions).	<b>9b</b>
<b>10</b> Capital gain distributions (see instructions).	<b>10</b>
<b>11a</b> IRA distributions.	<b>11a</b>
<b>11b</b> Taxable amount (see instructions).	<b>11b</b>
<b>12a</b> Pensions and annuities.	<b>12a</b>
<b>12b</b> Taxable amount (see instructions).	<b>12b</b> 6,636.
<b>13</b> Unemployment compensation and Alaska Permanent Fund dividends.	<b>13</b>
<b>14a</b> Social security benefits.	<b>14a</b> 17,604.
<b>14b</b> Taxable amount (see instructions).	<b>14b</b> 0.
<b>15</b> Add lines 7 through 14b (far right column). This is your total income. ▶	<b>15</b> 6,636.

**Adjusted gross income**

<b>16</b> Educator expenses (see instructions).	<b>16</b>
<b>17</b> IRA deduction (see instructions).	<b>17</b>
<b>18</b> Student loan interest deduction (see instructions).	<b>18</b>
<b>19</b> Tuition and fees. Attach Form 8917.	<b>19</b>
<b>20</b> Add lines 16 through 19. These are your total adjustments.	<b>20</b>
<b>21</b> Subtract line 20 from line 15. This is your adjusted gross income. ▶	<b>21</b> 6,636.

6,636  
17,604  
-----  
24,240 = 50%

9/19/19 Approved *elle*



Department of Taxation and Finance  
Office of Real Property Tax Services

**RP-425-Rnw**  
(7/18)

# Renewal Application for Enhanced STAR Exemption for The 2019-2020 School Year

If you received an Enhanced STAR exemption on your 2018-2019 school tax bill and wish to continue receiving the exemption for the 2019-2020 school year, you must submit this form to your assessor along with:

- Form RP-425-IVP, Supplement to Forms RP-425-E and RP-425-Rnw, and
- proof of income.

For help completing this form, see the instructions on page 2. Attach additional sheets if necessary.

Name(s) of owner(s) <i>Loring Moak Paul Moak Samantha Moak</i>			
Mailing address of owner(s) (number and street or PO Box) <i>271 Hale Rd.</i>		Location of property (street address) <i>285 Hale Rd.</i>	
City, village, or post office <i>Rensselaerville</i>	State <i>N.Y.</i>	ZIP code <i>12147</i>	City, town, or village <i>Rensselaerville</i>
Daytime contact number <i>518-239-4915</i>	Evening contact number		State <i>N.Y.</i>
E-mail address		School district <i>Greenville Central</i>	ZIP code <i>12147</i>
		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) <i>149.-1-4.1</i>	

1 Is the total 2017 combined income of all the owners, and of any owners' spouses residing on the premises, \$86,300 or less? (See Income for STAR purposes on page 2.) ..... Yes  No

**Note:** If Yes, you must attach a copy of the 2017 federal or 2017 state income tax returns for all owners, including nonresident owners. If your assessor needs tax schedules and tax form attachments they will contact you.

If you weren't required to file a federal or New York State income tax return for 2017, complete Form RP-425-Wkst, *Income for STAR Purposes Worksheet*, and submit it to the assessor.

If No, then you do not qualify for the Enhanced STAR exemption.

2 Do you or your spouse own another property that is either receiving a STAR exemption in New York State or a residency-based tax benefit in another state, such as the Florida Homestead exemption? ... Yes  No

If Yes, then you do not qualify for the Enhanced STAR exemption on this property.

## Certification

**Caution:** Anyone who misrepresents his or her primary residence, age, or income:

- will be subject to a penalty of the greater of \$100 or 20% of the improperly received tax savings
- will be prohibited from receiving the STAR exemption for six years, and
- may be subject to criminal prosecution.

I (we) certify that all of the above information is correct, that I (we) own the property listed above and it is my (our) primary residence and that my (our) 2017 income was less than \$86,300. I (we) understand it is my (our) obligation to notify the assessor if I (we) relocate to another primary residence and to provide any documentation of eligibility that is requested.

All resident owners must sign and date this form.

Signature <i>Loring R. Moak</i>	Date <i>9/14/19</i>
------------------------------------	------------------------

Signature	Date
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Return this form with Form RP-425-IVP to your local assessor by taxable status date (see Deadline on page 2).





**149.-1-4.1**  
**Moak, Loring**  
**285 Hale Rd**

**013600 Rensselaerville**    **Active**  
 Roll Year: **2018** Prior Year    **Rurl res&rec**  
 Land Size: **85.10 acres**

R/S:1    School: **Greenville Cent**  
 Land AV: **70,350**  
 Total AV: **100,350**

- Parcel 149.-1-4.1
  - History
  - Assessment
    - Exempt(s)**
    - Spec Dist(s)
  - Description
  - Owner(s)
  - Images
  - Gis
  - Site (1) Res
    - Land(s)
    - Bldg
    - Imprvmt(s)
    - Valuation
  - Sale08/07/18
    - Site (1) Res
      - Land(s)
      - Bldg
      - Imprvmt(s)
      - Valuation

**Total 2 Exemptions (Right-Click to Add)**

Exemption Code	Amount	Pct	Init Year	Term Year	Own Pct
<b>41800 OV65-ALL</b>	<b>50,175</b>	<b>50</b>	<b>2018</b>		
<b>41834 ENH STAR</b>	<b>41,320</b>		<b>2016</b>		

**Calc Sr. Exempts...**

Code: **41800 OV65-ALL**    Term Yr:   
 Amount: **50,175**    Init Year: **2018**  
 Percent: **50**    Own Pct:

**Misc:**  
 Res Pct:   
 Eq Rate: **61.85**  
 Spec Rate: **0**

**Exemption Amounts:**

County:	<b>50,175</b>
Muni:	<b>50,175</b>
School:	<b>50,175</b>

**Taxable Values:**

County:	<b>50,175</b>
Muni:	<b>50,175</b>
School:	<b>50,175</b>
Schl after STAR:	<b>8,855</b>



3  
Res  
5

Bargain & sale deed, with covenant against grantor's acts--Ind. or Corp.

CONSULT YOUR LAWYER BEFORE SIGNING THIS INSTRUMENT-THIS INSTRUMENT SHOULD BE USED BY LAWYERS ONLY.

THIS INDENTURE, made the 7<sup>th</sup> day of August, Two Thousand and Eighteen

**BETWEEN**

**LORING R. MOAK**, residing at 285 Hale Road, Rensselaerville, NY 12147  
party of the first part, and

**PAUL L. MOAK and SAMANTHA L. MOAK**, as **Husband and Wife**, residing at  
271 Hale Road, Rensselaerville, NY 12147

parties of the second part,

**WITNESSETH**, that the party of the first part, in consideration of One Dollar and other valuable consideration paid by the party of the second part, does hereby grant and release unto the party of the second part, the heirs or successors and assigns of the party of the second part forever,

ALL THAT PIECE OR PARCEL OF LAND situate, lying and being in the Town of Rensselaerville, County of Albany, State of New York bounded and described as follows:

SEE ATTACHED SCHEDULE A

**EXCEPTING AND RESERVING** unto LORING R. MOAK, during the term of his natural life, a life estate in the foregoing described premises which shall continue in all events until the death of said party of the first part.

LORING R. MOAK, hereby covenants to do the following during the term of the life estate reserved hereby:

- (1) To pay all taxes, assessments, water and sewer rents, and special assessments levied or assessed against the premises upon the receipt of the bills therefor and before the imposition of any penalties or interest thereon;
- (2) To keep the premises, described above, insured for the benefit of the parties of the first part and the party of the second part against fire, and the standard extended coverage endorsements and appropriate liability coverage and to pay all insurance premiums for such insurance;
- (3) To pay for all repairs which are necessary in order to keep the premises in a reasonable state of repair; and
- (4) To pay for all maintenance and upkeep associated with the premises described above including but not limited to cutting grass, garbage removal and other items related to the general upkeep of the premises.

Marian E. Moak died February 28, 2018 a resident of the Town of Rensselaerville, County of Albany, State of New York leaving Loring R. Moak as the sole surviving tenant by the entirety.