

The filing period for the 2026 Veterans' Credit Application is January 1, 2026 thru April 15, 2026.

Please note:

Page 2 of the PA-29 is to be complete by municipality only.
(back side)

FORM PA-29 NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
PERMANENT APPLICATION FOR PROPERTY TAX CREDITS/EXEMPTIONS
MUNICIPAL AUTHORIZATION - TO BE COMPLETED BY MUNICIPAL ASSESSING OFFICIALS

VETERANS' TAX CREDIT

MUNICIPAL TAX MAP	BLOCK	LOT	AMOUNT	GRANTED	DENIED	DATE
<input type="checkbox"/> Veterans' Tax Credit RSA 72:29 (Standard \$50, Optional \$11 up to \$750)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> All Veterans' Tax Credit RSA 72:29a (Standard \$50, Optional \$11 up to \$750)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Tax Credit for Service-Connected Total Disability (Standard \$700, Optional \$751 up to \$4,000)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Surviving Spouse Tax Credit (Standard \$700, Optional \$751 up to \$4,000)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Tax Credit for Combat Service pursuant to RSA 72:29a (Standard \$50 up to \$750)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Reviewed documents submitted by applicant (all documents reviewed)						
<input type="checkbox"/> Other Information: _____						

VETERANS' EXEMPTION

☐ Certain Disabled Veterans' Exemption GRANTED ☐ DENIED ☐ DATE _____

APPLICABLE ELDERLY, DISABLED AND DEAF EXEMPTION INCOME AND ASSET LIMITS

CONTACT YOUR MUNICIPALITY FOR INCOME AND ASSET LIMITS

Income Limits	Deaf Exemption	Disabled Exemption	Elderly Exemption	Elderly Exemption Per Age Category
Single				65-74 years of age
Married				75-79 years of age
Asset Limits				80+ years of age
Single				
Married				

STANDARD and LOCAL OPTIONAL EXEMPTIONS

	AMOUNT	GRANTED	DENIED	DATE
<input type="checkbox"/> Elderly Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Improvements to Assist Persons with Disabilities		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Blind Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Deaf Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Disabled Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Electric Energy Storage Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Solar Energy Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wind/Hybrid Energy Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wind-powered Energy Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Renewable Generation Facilities and Electric Energy Storage Systems		<input type="checkbox"/>	<input type="checkbox"/>	

A photocopy of this Form (Pages 1 and 2) or Form PA-25 must be returned to the property owner after approval or denial.

The following documentation may be requested at the time of application in accordance with RSA 72:24, 4:

☐ List of assets, value of each asset, net encumbrance and net value of each asset. ☐ State Interest and Dividends Tax Form.

☐ Statement of applicant and spouse's income. ☐ Property Tax Inventory Form filed in any other town.

☐ Federal Income Tax Form.

* Documents are considered confidential and must be returned to the applicant once a decision is made on the application.

Municipal Notes: _____

PRINT TYPE NAME OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ SIGNATURE IN BLOCK OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ DATE: _____

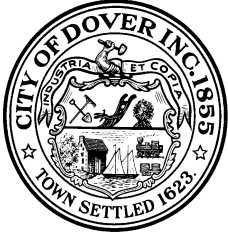
PRINT TYPE NAME OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ SIGNATURE IN BLOCK OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ DATE: _____

PRINT TYPE NAME OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ SIGNATURE IN BLOCK OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ DATE: _____

PRINT TYPE NAME OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ SIGNATURE IN BLOCK OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ DATE: _____

PRINT TYPE NAME OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ SIGNATURE IN BLOCK OF SELECTED MUNICIPAL ASSESSING OFFICIAL: _____ DATE: _____

[THIS PAGE IS LEFT INTENTIONALLY BLANK]



Veterans' Credit Application

Deadline: April 15, 2026

Approved credits are effective for the December 2026 tax bill

For questions or to schedule an appointment, please call 603-516-6014 or email

CityAssessors@dover.nh.gov

Return application to:

Tax Assessment Office

288 Central Ave,

Dover, NH 03820

Requirements, conditions, and instructions for this application are outlined below:

I. VETERANS' CREDITS OFFERED & ELIGIBILITY REQUIREMENTS: *These credits are available for Veterans or their spouse, or a Veteran's surviving spouse who meet the requirements.*

- i. VETERANS' CREDIT (RSA 72:28): **\$750** *(also offered to active duty military as of 2023)*
 - The City of Dover offers both the Veterans' Tax Credit (RSA 72:28) and the All Veterans' Tax Credit (RSA 72:28-b). An applicant can qualify for one of these credits.
 - Eligibility:
 - The Veteran must have served at least 90 days of active duty during a qualifying war or earned an armed forces expeditionary medal or theater of operations service medal (see chart on next page)
 - Training for active duty or state active duty by a member of National Guard or Reserve is included as service
 - The Veteran must have been Honorably discharged
 - Residency requirements apply
- ii. ALL VETERANS' CREDIT (RSA 72:28-b): **\$750**
 - The City of Dover offers both the Veterans' Tax Credit (RSA 72:28) and the All Veterans' Tax Credit (RSA 72:28-b). An applicant can qualify for one of these credits.
 - Eligibility:
 - The Veteran must have served at least 90 days of active duty
 - The Veteran must have been Honorably discharged
 - Training for active duty or state active duty by a member of National Guard or Reserve is included as service
 - Residency requirements apply
- iii. SERVICE-CONNECTED DISABILITY CREDIT (RSA 72:35): **\$4000**
 - An applicant can qualify for both the Veterans' Credit (RSA 72:28) and Service-Connected Disability Credit, but not the All Veterans' Credit (72:28-b) and Service-Connected Disability Credit.
 - Eligibility:
 - Must be considered totally and permanently disabled by the VA with a service-connected disability
 - Must have been Honorably separated from service
 - Residency requirements apply

II. APPLICANT REQUIREMENTS:

i. RESIDENCY REQUIREMENTS:

- Must be the owner of record on or before April 1, 2026
- Must occupy the property as their principal place of abode
- Must have been a NH resident since at least April 1, 2025
- If the property is owned by a trust the applicant must be the true and lawful Beneficial Interest Owner of the Trust that qualifies under the same guidelines as any other owner of property. Applicant must file Form PA-33 (Statement of Qualification) for property owned by a trust & satisfy the assessor that the applicant is a true beneficiary of the trust.
- If the applicant has a Life Estate in the property he/she must file PA-33 (Statement of Qualification)

ii. DOCUMENTATION:

- Any documents submitted in support of the application shall be considered to be confidential to protect the privacy of the applicant and kept with the application in an area separate from public documents
- Military discharge paperwork – DD214 or its equivalent
 - ***This document must show:***
 - Date of entry into active duty
 - Date of release from active duty
 - Character of discharge – must be Honorable
- For Service-Connected Disability application – Veterans Affairs documentation verifying permanent and total service-connected disability and character of discharge

III: FILING: A completed application will include:

1. Form PA-29 Permanent Application for Property Tax Credit/Exemptions (Page 1)
2. Required eligibility documentation – military discharge papers and/or VA documentation verifying total and permanent service-connected disability
3. Affidavit for Veterans Tax Credit
4. If the property is owned by a trust or if a life estate is involved:
 - PA-33 Statement of Qualification for Property Tax Credit, Exemption or Tax Deferral
 - An Trust Instrument or Certification of Trust
5. Applications are due by April 15, 2026

World War I	April 6, 1917	November 11, 1918	
World War II	December 7, 1941	December 31, 1946	
Korean Conflict	June 25, 1950	January 31, 1955	
Vietnam Conflict	July 1, 1958	December 22, 1961	Requires qualifying medal
Vietnam Conflict	December 22, 1961	May 7, 1975	
Other wars or conflicts	May 8, 1975	August 1, 1990	Requires qualifying medal
Persian Gulf War	August 2, 1990	To Be Determined	

PERMANENT APPLICATION FOR PROPERTY TAX CREDITS/EXEMPTIONS

DUE DATE APRIL 15 PRECEDING THE SETTING OF THE TAX RATE

STEP 1 OWNER AND APPLICANT NAME AND ADDRESS	<div style="text-align: center;">OWNER AND APPLICANT INFORMATION</div> <p>OWNER <input type="text"/> If required, is a PA-33 on file? <input type="radio"/> YES <input type="radio"/> NO PHONE NUMBER <input type="text"/></p> <p>APPLICANT'S LAST NAME APPLICANT'S FIRST NAME MI PHONE NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>APPLICANT'S LAST NAME APPLICANT'S FIRST NAME MI PHONE NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>MAILING ADDRESS <input type="text"/></p> <p>CITY/TOWN STATE ZIP CODE <input type="text"/> <input type="text"/> <input type="text"/></p> <p>PROPERTY ADDRESS TAX MAP BLOCK LOT <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>IS THIS YOUR PRIMARY RESIDENCE? <input type="radio"/> YES <input type="radio"/> NO</p>	PROPERTY OWNER NAME
STEP 2 VETERANS' TAX CREDITS AND EXEMPTION	<div style="text-align: center;">VETERAN'S INFORMATION</div> <p>1. APPLICANT IS THE: 2. APPLYING FOR:</p> <p><input type="radio"/> Veteran <input type="checkbox"/> Veterans' Tax Credit (RSA 72:28) Standard (\$50) / Optional (\$51 up to \$750) <input type="radio"/> Spouse <input type="checkbox"/> All Veterans' Tax Credit (RSA 72:28-b) If Adopted by Town Standard (\$50) / Optional (\$51 up to \$750) <input type="radio"/> Surviving Spouse <input type="checkbox"/> Tax Credit for Service-Connected Total Disability (RSA 72:35) Standard (\$700) / Optional (\$701 up to \$4,000) <input type="checkbox"/> Tax Credit for Surviving Spouse (RSA 72:29-a "...of any person who was killed or died while on active duty...") <input type="checkbox"/> Tax Credit for Combat Service (RSA 72:28-c) If Adopted by Town (\$50 up to \$500) <input type="checkbox"/> Certain Disabled Veterans (Exemption) (RSA 72:36-a)</p> <p>3. Veteran's Name Dates of Military Service 4. Date of Entry 5. Date of Discharge/Release <input type="text"/> Enter (MMDDYYYY) <input type="text"/> <input type="text"/></p> <p>IF A VETERAN OF ALLIED COUNTRY: (RSA 72:32)</p> <p>6. Name of Allied Country Served in 7. Branch of Service <input type="text"/> <input type="text"/></p> <p>9. Does any other eligible Veteran own interest in this property? YES NO If YES, provide name <input type="radio"/> <input type="radio"/> <input type="text"/></p> <p>8. Please Check One. <input type="radio"/> US Citizen at time of entry into Service <input type="radio"/> Alien but resident of NH at time of entry into Service</p>	PROPERTY OWNER NAME
STEP 3 EXEMPTIONS	<div style="text-align: center;">STANDARD EXEMPTIONS</div> <p>10. <input type="checkbox"/> Elderly Exemption (Must be 65 years of age on or before April 1 of year for which exemption is claimed) (RSA 72:39-a) (Enter numbers only MMDDYYYY) 10a. Applicant's Date of Birth <input type="text"/> 10b. Spouse's Date of Birth <input type="text"/></p> <p>11. <input type="checkbox"/> Improvements to Assist Persons with Disabilities (RSA 72:37-a)</p> <p>12. <input type="checkbox"/> Blind Exemption (RSA 72:37)</p> <div style="text-align: center;">LOCAL OPTIONAL EXEMPTIONS (If adopted by city/town)</div> <p>13. <input type="checkbox"/> Deaf Exemption (RSA 72:38-b) <input type="checkbox"/> Electric Energy Storage Systems Exemption (RSA 72:85) <input type="checkbox"/> Disabled Exemption (RSA 72:37-b) <input type="checkbox"/> Wind-Powered Energy Systems Exemption (RSA 72:66) <input type="checkbox"/> Solar Energy Systems Exemption (RSA 72:62) <input type="checkbox"/> Woodheating Energy Systems Exemption (RSA 72:70) <input type="checkbox"/> Renewable Generation Facilities and Electric Energy Storage Systems Exemption (RSA 72:87)</p> <p>14. <input type="checkbox"/> NH Resident for One Year preceding April 1 in the year in which the tax credit is claimed (Veterans' Tax Credit) <input type="checkbox"/> NH Resident for Five Consecutive Years (Deaf) or At least Five Years (Disabled) preceding April 1 in the year the exemption is claimed <input type="checkbox"/> NH Resident for Three Consecutive Years preceding April 1 in the year the exemption is claimed (Elderly Exemption)</p>	TAX MAP BLOCK LOT
STEP 4 RESIDENCY	<p>15. Do you own 100% interest in this residence? <input type="radio"/> Yes <input type="radio"/> No If NO, what percent (%) do you own? <input type="text"/></p>	
STEP 5 OWNERSHIP	<p>Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete.</p> <p>SIGNATURE (IN INK) OF PROPERTY OWNER DATE</p> <p>SIGNATURE (IN INK) OF PROPERTY OWNER DATE</p>	
STEP 6 SIGNATURES		

PERMANENT APPLICATION FOR PROPERTY TAX CREDITS/EXEMPTIONS

MUNICIPAL AUTHORIZATION - TO BE COMPLETED BY MUNICIPAL ASSESSING OFFICIALS

VETERANS' TAX CREDIT

MUNICIPAL TAX MAP	BLOCK	LOT	AMOUNT	GRANTED	DENIED	DATE
<input type="checkbox"/> Veterans' Tax Credit RSA 72:28 (Standard \$50; Optional \$51 up to \$750)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> All Veterans' Tax Credit RSA 72:28-b (Standard \$50; Optional \$51 up to \$750)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Tax Credit for Service-Connected Total Disability (Standard \$700; Optional \$701 up to \$4,000)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Surviving Spouse Tax Credit (Standard \$700; Optional \$701 up to \$2,000)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Tax Credit for Combat Service pursuant to RSA 72:28-c (\$50 up to \$500)				<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Reviewed documents submitted by applicant (list documents reviewed)						
<input type="checkbox"/> Other Information						

VETERANS' EXEMPTION

<input type="checkbox"/> Certain Disabled Veterans' Exemption	GRANTED <input type="checkbox"/> DENIED <input type="checkbox"/>	DATE
---	--	------

APPLICABLE ELDERLY, DISABLED AND DEAF EXEMPTION INCOME AND ASSET LIMITS

CONTACT YOUR MUNICIPALITY FOR INCOME AND ASSET LIMITS

Income Limits	Deaf Exemption	Disabled Exemption	Elderly Exemption	Elderly Exemption Per Age Category
Single				65-74 years of age
Married				75-79 years of age
Asset Limits				80+ years of age
Single				
Married				

STANDARD and LOCAL OPTIONAL EXEMPTIONS

	AMOUNT	GRANTED	DENIED	DATE
<input type="checkbox"/> Elderly Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Improvements to Assist Persons with Disabilities		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Blind Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Deaf Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Disabled Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Electric Energy Storage Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Solar Energy Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Woodheating Energy Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wind-powered Energy Systems Exemption		<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Renewable Generation Facilities and Electric Energy Storage Systems		<input type="checkbox"/>	<input type="checkbox"/>	

A photocopy of this Form (Pages 1 and 2) or Form PA-35 must be returned to the property owner after approval or denial.

The following documentation may be requested at the time of application in accordance with RSA 72:34, II.

<input type="checkbox"/> * List of assets, value of each asset, net encumbrance and net value of each asset.	<input type="checkbox"/> * State Interest and Dividends Tax Form.
<input type="checkbox"/> * Statement of applicant and spouse's income.	<input type="checkbox"/> * Property Tax Inventory Form filed in any other town.
<input type="checkbox"/> * Federal Income Tax Form.	

* Documents are considered confidential and must be returned to the applicant once a decision is made on the application.

Municipal Notes

PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

DATE

PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

DATE

PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

DATE

PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

DATE

PRINT / TYPE NAME OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

SIGNATURE (IN INK) OF SELECTMAN / MUNICIPAL ASSESSING OFFICIAL

DATE

AFFIDAVIT FOR VETERAN TAX CREDIT

Please read, initial each line, and then sign below. If there is anything you do not understand, please ask the assessing staff for clarification.

_____ I certify that I do not claim residency in any other city or town, in any other state.

_____ I certify that I have been a resident of New Hampshire for 1 year preceding of April 1 in the year applying for tax credit

_____ I certify under penalty of perjury that I am not receiving any other residential tax exemption or tax credit in any other community within New Hampshire and I am not receiving a similar benefit, such as a homestead exemption, in any other state.

_____ If my marital status changes, I must notify the Assessing Department.

_____ If I relocate within the City of Dover, I must file an amended application the Assessing Department as soon as possible, on or before a new tax rate has been set, immediately following the change in residence.

_____ I understand that if I place my home in an Irrevocable Trust, I may no longer be eligible to claim a tax credit or exemption.

_____ A person is guilty of a misdemeanor if, with the purpose to deceive a public servant in the performance of his/her official function, he/she makes any written false statement which he/she does not believe to be true, or if he/she knowingly creates a false impression in written application for pecuniary or other benefits by omitting information necessary to prevent statements therein from being misleading, or if he/she submits or invites reliance on any writing which he/she knows to be lacking in authenticity. RSA 641:3

I/We have read and understand the above statements. Any misrepresentation on my part may result in court action for recovery. I certify the information submitted is true and accurate to best of my knowledge.

_____	_____	_____	_____
Signature of Applicant	Date	Signature of Spouse	Date

_____	_____
Print Name	Print Name

[THIS PAGE IS LEFT INTENTIONALLY BLANK]

STATEMENT OF QUALIFICATION FOR PROPERTY TAX CREDIT, EXEMPTION OR TAX DEFERRAL UNDER RSA 72:33, V

(to be submitted with Form PA-29 or Form PA-30)

USE THIS FORM IF YOUR PROPERTY IS HELD IN A TRUST, OR IF YOU HOLD EQUITABLE TITLE OR A LIFE ESTATE

TYPE OR PRINT

OWNER			
APPLICANT'S LAST NAME		APPLICANT'S FIRST NAME	MI <input type="checkbox"/>
APPLICANT'S LAST NAME		APPLICANT'S FIRST NAME	MI <input type="checkbox"/>
MAILING ADDRESS			
CITY/TOWN		STATE	ZIPCODE
PROPERTY ADDRESS for which Tax Credit / Exemption / Deferral is claimed			

I am eligible for a property tax credit, exemption or tax deferral against the property for which a Permanent Application, Form PA-29, or Tax Deferral Application, Form PA-30, has been made, and do qualify as the owner of the property under RSA 72:29, VI, based upon the following: **(check one)**

- ☐ Grantor/Revocable Trust
- ☐ Equitable Title holder or
- ☐ Beneficial interest for life (Life estate owner)

The appropriate document must be supplied:

- (a) A Trust instrument as defined in RSA 564-B:1-103 (20);
- (b) A Certification of Trust prepared in accordance with RSA 564-B:10-1013; or
- (c) A deed or other legal document showing the assigned ownership.

Legal Name of Trust (if different than above): _____

All documents submitted shall be handled to protect the privacy of the applicant.

Explanation or additional details:

Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete.

X

SIGNATURE (IN INK)

PRINT NAME

DATE

X

SIGNATURE (IN INK)

PRINT NAME

DATE

TELEPHONE NUMBER

WHO MUST FILE	To be completed by property owners to establish their status as grantor of the property to a revocable trust, or holding equitable title or the beneficial interest for life in the property. RSA 72:29, VI. For purposes of RSA 72:28, 28-b, 28-c, 29-a, 30, 31, 32, 33, 35, 36-a, 37, 37-a, 37-b, 38-a, 39-a, 62, 66, and 70, the ownership of real estate, as expressed by such words as "owner," "owned," or "own," shall include those who have placed their property in a grantor/revocable trust or who have equitable title or the beneficial interest for life in the subject property.
WHEN TO FILE	This completed form shall be submitted with the Permanent Application, Form PA-29 (RSA 72:33), for property tax credit or exemption, or the Tax Deferral Application, Form PA-30 (RSA 72:38-a), to the local municipal assessing officials of the City/Town in which such application is filed. The completed Form PA-33 becomes a permanent document and does not need to be re-filed unless the status of the trust or life estate is changed or altered.