

**Cherokee County**

**Elderly Exclusion, Disabled Exclusion, Disabled Veteran Exclusion and Circuitry Breaker Deferment**

**Application Checklist**

Items needed for Elderly, Disabled, and Circuit Breaker:

AV-9 form completed and signed

A copy of page one of your Federal Tax Return for the previous year (Form 1040)

**If you do not file a Federal Tax Return you must provide all the following that apply:**

- |           |          |  |
|-----------|----------|--|
| Yes _____ | No _____ | Social Security Benefits (SSA-1099) (Taxable & Tax Exempt)                     |
| Yes _____ | No _____ | Supplemental Social Security Benefits (Award letter)                           |
| Yes _____ | No _____ | Wages, Salaries, Tips, Etc. (W-2)  |
| Yes _____ | No _____ | Interest (Taxable & Tax Exempt) (1099-Int)                                     |
| Yes _____ | No _____ | Dividends (1099-DIV)   |
| Yes _____ | No _____ | VA Benefits  |
| Yes _____ | No _____ | IRA Distributions (Form 8606)  |
| Yes _____ | No _____ | Pensions & Annuities (1099-R)  |
| Yes _____ | No _____ | Farming Income (1040-SCH F) or (1120-Corp Return)                              |
| Yes _____ | No _____ | Income from the sale of timber (Harvest reports)                               |
| Yes _____ | No _____ | Rental Income (1040 SCH-E or 1040-SCH-C)                                       |
| Yes _____ | No _____ | Tribal Per. Cap Income   |
| Yes _____ | No _____ | Other Income (Any documentation indicating total annual moneys received)       |
| Yes _____ | No _____ | Bank Statements (Previous 12 months) *Only used as last resort of verification |

**Items needed for Elderly Exclusion:**

- AV-9 form completed and signed
- **Income information as stated above**

**Items needed for Disabled Exclusion:**

- AV-9 form completed and signed
- Income information as stated above
- AV-9A form completed and signed by a North Carolina Licensed Physician

**Items needed for Disabled Veteran Exclusion**

- Av-9 form completed and signed
- NCDVA-9 form completed, signed and certified by the United States Department of Veterans Affairs
- Income verification not required
- **For review purposes only NCDVA-9 is required**

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date