## HR-1040 2003

Firm's Name



## STATE OF NEW JERSEY HOMESTEAD REBATE APPLICATION

-	2003	11111		ш												
_	↓ IMPORTA	NT! YOU MUST E	ENTER YOUR SSI	N (s).↓												
Г	Your Soci	al Security Numbe	er	Last Name, First Name and Initial (Joint filers enter first name and Initial of each - Enter spouse last name ONLY if different)										o		
o ito	Spouse's												inted ise, print			
1	Spouse's	Social Security Nu	Home Address (Number and Street, including apartment number or rural route)													
	D	<b></b>												Place label on form if all preprinted information is correct. Otherwise, print or type your name and address.		
1.5	County/M	unicipality Code (S	City, Town, Post Office State					<u> </u>	Zip Code				el on l in is c name			
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														Plac infol		
Privacy Act Notification.	<b>g</b> 1. ⊂	⊃ Single	4.	————	ad of household	RESIDEN	ICY STA	ATUS		100	N/I /	БГ		V	V	
	1. Single 4. Head 4. Head 4. Qual				lifving widow(e			From ii-	IVI	IVI /	LUL	/[ע	ľ	LY		
10.00	_ ( (3)		mynig maon(o	NLY part ogive the poersey reside		M	M/	D	D/	Y	Y					
L																
	Fill in only	On December 31, 2003, I (and/or my spouse) was a. —  Age 65 or older b. —  Blind or disabled c. —  Not 65 or blind or disabled Fill in only <b>one</b> oval. See instructions on page 48.														
			you reported on L			orm NJ-1040							ΤГ		7	
	9. If your filir	g status is MARRI	IED, FILING SEPA	ARATE	RETURN and	ETURN and you					' <b>;</b> ;;;;	=	7 F	+	╡	
			THE SAME PRIN on your spouse's re			enter	9	<b></b> ,			,Ш		J.L		┛	
		040) and fill in ov			<del>→</del>								ΤГ		п.	
1			Add Line 8 and Lin				10	,		Ш	, Ш		J,∟			
1	STOP - IF	STOP - IF LINE 10 IS MORE THAN \$100,000, YOU ARE NOT ELIGIBLE FOR A REBATE. FURTHER RESTRICTIONS MAY BE APPLIED.  Enter your New Jersey residence on December 31, 2003, if different than above. If you were not a resident on December 31, 2003, enter your last New Jersey residence.											I <mark>ED</mark> . , resid	ence		
Street Address Municipality											400 11011	00.00	10010	01100.		
1	12. Fill in your residency status during 2003: a. —   HOMEOWNER b. —   TENANT c. —   BOTH															
1		. If you indicated "Homeowner" or "Both" on Line 12, enter the block and lot number of the residence residence during the year?														
		he rebate is claim		residence during the year?												
	Block  b. Did you share ownership of a principal residence during the year with anyone other than your spouse?									es		<b>←</b> No				
	Ш	шш	c. Did an	ny principal residence you owned during the												
		Lot year consist of multiple units?   Yes								es		<b>←</b> N				
	Ш			<ul> <li>Did anyone, other than your spouse, occupy and share rent with you for an apartment or other</li> </ul>												
			rental	dwelling during	the year?	🗀 <b>←</b> Yes 🗀				<b>←</b> No						
		Г	$\overline{}$			If you answered "Yes" to any of the above, you M						JST complete Schedule H				
_	45 Fata	the tetal 2002 and												==		
HOMEOWNER	on vo		operty taxes you (a ence in New Jerse				15	I I.		ш			ш	1	1	
	IF YOU CO		DULE HR-A, PAR					Ħ	' =		7 F					
EO	16a. Total	Property taxes pa	ine 5)		16a	Ш,		Ш	,Ш,		J.L					
MC						_		,		-						
Ĭ	16b. Num	per of days as an o	owner (Sch. HR-A	I, Line 4)	I, Line 4)			Day	/S							
	17. Ente	the total rent you	(and your spouse	n your			П	П		٦г	Т					
Ļ	princ	pal residence in N			17	<u> </u>		므	, 🖳		날, 날	_	_			
TENANT	IF YOU CO	MPLETED SCHE			18a			П			ПΓ	Т				
Ξ	18a. Total	Rent Paid (Sch. F	HR-A, PART II, Lin	•••••												
	18b. Num	Days														
Г		-			-		octood rob	ata appli	ication in	duding	16	01	U 37 CE			
	accompanyir	Under the penalties of perjury, I declare that I have examined this income tax return and homestead rebate application, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. If prepared by										If you are ONLY filing a Homestead Rebate				
lu	u .	ii iilaii iaxpayei, iilis	deciaration is based	u OII all II	formation of which the preparer has any knowledge.							Application, mail your application to:				
	Your Sig			Date	<u>Sno</u>	use's Signature (I	f filing joint!	v BOTH	must sign	<u> </u>	1			e -		
眉	_	Your Signature Date Spouse's Signature (If filing jointly, BOTH must sign)  NJ Division of Taxa  Revenue Processir										nter				
Z	7	authorize the Division of Taxation to discuss my return and enclosures with my preparer (below)								PO B	ox 197					
								fication Number								
U	<b>'</b>	aru i reparer 3 Signature														

Federal Employer Identification Number