TOWN OF CHESTER

PROPERTY TAX WORK-OFF PROGRAM

APPLICATION

Name:	Telephone	:
Address:		
Email:		
Eligibility:	Yes	No
Age 60 as of July 1		
Homeowner/Co-Owner or Spouse of Homeowner		
Chester Resident		
Reside in property for which the tax reduction is requested		
Can produce a copy of current tax bill		
Experience and Placements: Job placements are available in you might like to work:	many town de	epartments. Please indicate areas in which
Town Hall/Clerk's Office	Council on A	Aging Office
Board of Health Office	Electric Light Dept.	
Town Hall/Selectboard/Assessor	Transfer Station	
Past Experience and Skills: Please describe past job or volun	toor ovnorions	es that might qualify you for a particular
opening. Also, list any skills which you have such as typing,	•	
If I qualify for the Property Tax Work-Off Program, I understan applied as a reduction to my town of Chester Property Tax. It or salary for my work.		•
Signature:	Dated:	

Please mail application to: Board of Assessors 15 Middlefield Rd. Chester, MA 01011