

Maine Revenue Services

Residence Questionnaire

Tax Compliance Unit State House Station #24 Augusta ME 04333

TAX YEARS UNDER REVIEW _____

Please complete the following questions with respect to the tax years under review. If you need additional space, please use the reverse side of this form. You may also attach any documentation which better supports your position.

Taxpayer's Name: Spouse's Name: Maine Address:		Social Security Number: Social Security Number: Social Security Number: Other Address:				
				(1)	Taxpayer's Occupation:	Spouse's Occupation:
					Taxpayer's Occupation: If you or your spouse are active duty military, please indicate your Home of Record:	
	Work Address:	Work Address:				
(2)	Taxpayer's Date of Birth:	Spouse's Date of Birth:				
• •	Place of Birth:	Place of Birth:				
(3)	What complete physical address do you consider to be your legal domicile for the tax years in question?					
	What ties do you consider to be your bas	is for legal domicile?				
(4)	Have you ever resided in Maine with the intention of making it your home?					
• •	If yes, when did you become domiciled in Maine?					
	If no, please explain your connections with the State of Maine.					
(5)	Did you claim a deduction for moving expenses on your Federal Income Tax Return?					
(-)		If no, why?				
(6)	If married, did the physical presence of your spouse and family differ substantially from yours?					
	If yes, explain the circumstances.					
(7)	Did you or your spouse own any real pro	perty during the tax years in question? Please list the city and state where				
	each piece of property is located and year(s) of ownership.					
	If you owned property, did you receive a H copy of the tax bill showing the property a	Homestead or Veterans exemption on this property? (Please include a				



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- (9) List every State in which you or your spouse filed State Income Tax returns for the tax years in question. **Please** enclose a copy of each return.
- (10) For the tax years in question, list the state(s) and applicable years in which you or your spouse had the following. If any state other than Maine, **please provide supporting documentation**.

	Applicable state(s)	Applicable year(s)	Spouse
(A) Driver's License			
(B) Voter Registration			
(C) Auto Registrations			
(D) Boat or Airplane Registrations			
(E) Hunting/Fishing Licenses (Resi	dent or NonResident?)		
(F) Children Registered in School			
(G) Civic, Religious or Community	activities		
(H) Professional Licenses			
(I) Insurances for Auto or Home			

(11) List the number of days spent in Maine during each of the tax years in question.

Under penalties of perjury, I declare that to the best of my knowledge and belief, the above is true, correct and complete.

Signature

Date

Spouse's Signature

Date