

OFFICE OF TAX ASSESSOR
APPLICATION FOR EXEMPTION
PURSUANT TO R.I.G.L. 44-3-3 (16)

THIS FORM MUST BE RECEIVED BY MARCH 15TH

Date _____

A. PERSONAL INFORMATION

- 1. Name: _____
Last
First
Middle Initial
Social Security Number
- 2. Applicants Age: _____ Date of Birth: _____
- 3. Marital Status: Married _____ Single _____ Widow(er) _____
 Spouse's Name: _____ Social Security Number _____
- 4. Are you a legal resident of the State of Rhode Island? Yes _____ No _____
 If married, is your spouse a legal resident of Rhode Island? Yes _____ No _____

B. RESIDENCE INFORMATION

- 5. Property Address _____
- 6. When did you acquire this property? _____
Month
Day
Year
- 7. Do you reside at this address for 12 months each year? Yes _____ No _____
- 8. How many dwellings units at this location? 1. 2. 3. 4. More than 4
 (Circle appropriate number)
- 9. List the names of any other joint or co-tenants who occupy the said property:

- 10. Plat _____ Lot _____ Account Number _____
- 11. Opinion of current value \$ _____

C. FINANCIAL INFORMATION

Income; (if married, include income of spouse. Also include income of any other joint or Co-tenant living in the residence.)

- a. Wages, Salaries, Tips \$ _____
- b. Dividends _____
- c. Social Security _____
- d. Interest _____
- e. Pensions, Annuities, Retirement _____

f. Business income _____

g. Capital gains, Gifts, or Inheritances _____

h. Rents or royalties _____

i. Other (explain) _____

Total Income \$ _____

D. REAL ESTATE HOLDINGS List below all real estate holdings owned in any form exclusive of the residence listed in part B of this application. Holdings should include properties outside of Newport.

Street Address _____ City _____ State _____ Value\$ _____

Street Address _____ City _____ State _____ Value\$ _____

Street Address _____ City _____ State _____ Value\$ _____

E. MOTOR VEHICLES & EQUIPMENT List below all motor vehicles and equipment including boats registered in Rhode Island or any other State.

Year	Make/Model	Taxed Value
_____	_____	_____
_____	_____	_____
_____	_____	_____

F. HOUSEHOLD FURNISHINGS AND COLLECTIBLES OF VALUE

Estimate of household furnishings & equipment in your possession \$ _____

Estimate of antiques, collectibles, or articles other than above \$ _____

G OTHER ASSETS

1. Checking Account (average balance) \$ _____

2. Savings Account (average balance) \$ _____

3. Certificate of Deposit \$ _____

4. Stocks, bonds, etc. \$ _____

5. Money on hand (average balance) \$ _____

Total Balance \$ _____

Note: This form must be filled out and filed by March 15th 2006. Failure to complete this form or sending it back with missing or incorrect data may result in the exemption being denied. If you need help or have a question please call the Assessor Office at 845-5363

I, the undersigned, do hereby swear or affirm that the above information is true and correct to the best of my knowledge and belief.

Signed _____ Date _____

Signature or preparer if other than applicant _____

Address _____ Phone Number _____

TITLE 44

Taxation

CHAPTER 44-3

Property Subject to Taxation

SECTION 44-3-3

(16) The estate of any person who in the judgment of the assessors is unable from infirmity or poverty to pay the tax; providing, that in the town of Burrillville the tax shall constitute a lien for five (5) years on the property where the owner is entitled to the exemption. At the expiration of five (5) years, the lien shall be abated in full. Provided, if the property is sold or conveyed or if debt secured by the property is refinanced during the five (5) year period, the lien immediately becomes due and payable; any person claiming the exemption aggrieved by an adverse decision of an assessor shall appeal the decision to the local board of tax review, and thereafter according to the provisions of section 44-5-26;

The Cumberland Tax Assessor's Office used the 100% Disabled Income bracket qualifications as a guide, however all Limited Income applications at approved at the discretion of the Tax Assessor. The Income qualifications are as follows:

<u>Income Bracket:</u>	<u>Exemption (<i>subject to Tax Assessor's Approval</i>)</u>
\$0-\$10,499	\$21,431
\$10,500-14,999	\$17,145
\$15,000-\$19,999	\$12,858
\$20,000-24,999	\$8,572