CITY OF PROVIDENCE DECLARATION FOR HOMESTEAD EXEMPTION/OWNER-OCCUPIED



Plat: _____ Lot: _____ Unit: _____

Name:

(Last, First Middle Initial)

To the Providence City Assessor,

This is my **DECLARATION FOR HOMESTEAD EXEMPTION/OWNER-OCCUPIED** in the **CITY OF PROVIDENCE** to which I am filing on this day.

I hereby declare that I reside in and maintain a place of abode at:

Number & Street Name

Apt. Or Unit #

Providence, Rhode Island

Zip Code

I hereby declare that my above described residence in the CITY of PROVIDENCE constitutes my predominant and principle home. I intend to continue it to be permanently as such, and at the time of making this declaration, I am a bona fide resident of the CITY of PROVIDENCE.

I hereby submit as proof of residency and identity, a copy of my *Rhode Island Vehicle Registration* (required) <u>AND</u> *Rhode Island Driver's License* (required) or *Rhode Island State Identification Card*.

In the event in which the applicant does <u>NOT</u> have a motor vehicle registered to their name the following document can be included with your application:

[] Homeowner's Insurance policy (declaration page)

***** DOCUMENTS SUBMITTED HAS TO MATCH THE PROPERTY

*NOTE: ALL FURNISHED DOCUMENTS PROVING RESIDENCY MUST REFLECT THE ADDRESS OF THE PROPERTY FOR WHICH EXEMPTION IS BEING SOUGHT. THE CITY ASSESSOR MAY REQUIRE ADDITIONAL INFORMATION, WHICH HE/SHE DEEMS NECESSARY TO CARRY OUT THE INTENT OF THE ORDINANCE.

IF THE TAXPAYER KNOWINGLY GIVES MISINFORMATION AS TO OWNERSHIP AND/OR OCCUPANCY OF THE REAL ESTATE ON HIS/HER APPLICATION FOR A HOMESTEAD EXEMPTION/OWNER-OCCUPIED. THE CITY ASSESSOR MAY, IN SUCH EVENT, REMOVE THE HOMESTEAD EXEMPTION/OWNER-OCCUPIED AND RECALCULATE THE TAX FOR THE PERIOD IN QUESTION AND IN ADDITION CHARGE THE TAXPAYER THE MAXIMUM INTEREST PERMITTED BY LAW.



1. Please list all other properties that you own in any other <u>CITY</u>, <u>TOWN</u> or <u>STATE</u>. If neither you nor anyone else who is listed on the deed at your address owns any other properties, please indicate by marking **N/A** in the boxes below. In your answer, please include:

Street Address	City/Town	State/Zip Code

2. Please list all vehicles registered that you own in any other <u>CITY, TOWN</u> or <u>STATE</u>. If you do not own a vehicle indicate by marking **N/A** in the boxes below. In your answer, please include:

Make/Model/Year	City/Town	State/Zip Code

By Checking ALL of the following boxes, AND signing below, I swear that I:

[] Own [(Am a natural person(s)] holding legal title] my residence (home)

[] Actually reside (live) in my residence.

[] Am a permanent Providence resident.

I hereby certify under oath, and subject to the pains and penalties of perjury, that all of the information described on this form is accurate after a reasonable search and to the best of my knowledge. Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

	Signature
	Print Name
	Phone Number/E-Mail
State of Rhode Island City of Providence Sworn to and subscribed before me this	day of,by the above named, who
[] Is personally known to me OF	R [] has produced the following type of ID:
Signature of Notary Commission Expiries:	Print, Type or Stamp Commissioned Name Commission Number:
2	Tax Assessors Office 25 Dorrance Street, RM 208 Providence, RI 02903