



City of Providence
Indigent Application

As provided by Rhode Island General Law 44-3-3 (16), any person deemed impoverished may request relief from property taxes. To qualify for consideration you must:

- Reside in the home for a minimum of 10 year
Provide the Assessor's Office with any and all documents to substantiate your request
REQUIRED: federal tax return (if applicable), (3) months of bank checking/savings statements, proof of income, receipts of expenses (listed on the second page) such as rent/mortgage, utilities etc.
Allow an appraiser from our office to inspect the property for assessment purposes
Furnish a complete application with all photocopies of supporting documents already made
Must be completed by the applicant him/herself PRIOR to submission

Applicant Information

Claimant 1
Name: Last First M.I. Date:

Claimant 2
Name: Last First M.I. Date:

Property Address: Street Address Condo/Unit #

Phone: Email

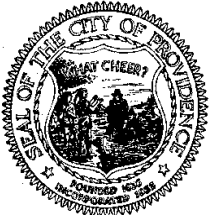
Age of Claimant 1: Age of Claimant 2: Number of dependents:

Disclaimer and Signature

I, the undersigned claimant, attest that all information contained herein is true to the best of my knowledge and that the City of Providence is authorized to investigate and verify any such information.

Signature 1: Date:

Signature 2: Date:



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**Household Expenses**

Expense	Monthly
Mortgage	
Property Taxes	
Homeowners Insurance	
Association Fees	
Other Mortgages	
Automobile	
Other automobile	
Auto Insurance	
Gasoline	
Water	
Sewer	
Gas	
Oil	
Electricity	
Medical (Not covered by insurance)	
Insurance (life/disability)	
Child/Dependent Care	
Groceries	
Total:	

**Gross Monthly Income**

Income	Applicant	Co-Applicant
Social Security		
Unemployment		
Pension/Annuity		
Dividend and Interest		
Rental/Board		
SNAP		
Wages		
Cash Public Assistance		
Child Support		
Total Income:		
Combined Income:		

**Reserve**

Checking Account	
Total:	
Savings Account Total:	
Cash On Hand:	
Stocks/Bonds Total:	
Total:	