



Plat: \_\_\_\_\_ Lot: \_\_\_\_\_ Unit: \_\_\_\_\_

## APPLICATION FOR ELDERLY EXEMPTION

Applicants must file by **March 15<sup>th</sup>**. Forms are available at the Providence City Assessors Office. Applicant must own and reside at the property prior to December 31<sup>st</sup>. A **“Residence”** is to be considered four (4) living units or less. Dwellings containing commercial, retail and/or office space are **NOT** eligible for the elderly exemption.

All exemptions will **terminate** upon conveyance of the property, death of the person exempted or moving of said person from the property.

### ***Section One:***

Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Providence, Rhode Island \_\_\_\_\_

Zip Code

### ***Section Two:***

1. Do you reside in the property twelve (12) months of the year? Yes / No
  
2. Number of units in the property? \_\_\_\_\_

### ***Section Three:***

Document Submitted as Proof of Age: (Please Check One)

Driver's License     Birth Certificate     RI ID     Passport

**THE UNDERSIGNED DOES HEREBY SWEAR THAT THE ABOVE INFORMATION IS TRUE AND CORRECTED TO THE BEST OF HIS OR HER KNOWLEDGE.**

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

Tax Assessors Office  
25 Dorrance Street, RM 208  
Providence, RI 02903  
Tel: 401-421-5900