

CITY OF PROVIDENCE DECLARATION FOR HOMESTEAD EXEMPTION  
AS OF 12/31/2020



Plat: \_ Lot: \_ Unit: \_ (Assessing Staff will complete if you do not know it)

PID # \_ (Assessing Staff will complete if you do not know it)

Name: \_\_\_\_\_  
(Last, First Middle Initial)

Co-Owner: \_  
(Last, First Middle Initial)

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

Number & Street Name \_\_\_\_\_ Apt. Or Unit # \_\_\_\_\_

Providence, Rhode Island \_\_\_\_\_  
Zip code \_\_\_\_\_

Email Address \_\_\_\_\_

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 Driver's License or Rhode Island Identification Card.**

**\*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.

Please list **ALL** properties that you own including any other CITY, TOWN or STATE. 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

1. Please list **ALL** vehicles registered that you own including any other CITY, TOWN or STATE. 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

\_\_\_\_\_  
Phone Number/Email

Tax Assessors Office  
25 Dorrance Street, RM 208  
Providence, RI 02903  
Assessor@providenceri.gov  
401-680-5229