

APPLICATION FOR ABATEMENT OF PROPERTY TAX

In accordance with RI General Laws Title 44, Chapter 44-5, Section 44-5-26

For appeals to the tax assessor, this form must be filed with the local office of tax assessment within ninety (90) days from the date the first tax payment is due. For appeals to the local tax board of review, this form must be filed with the local tax board of review not more than thirty(30) days after the assessor renders a decision, or if the assessor does not render a decision within forty-five (45) days of the filing of the appeal, not more than ninety (90) days after the expiration of the forty-five (45) day period. FILING DATES AUG 5TH-NOV 3RD

ONLY ONE PROPERTY PER APPLICATION-

~YOU ARE REQUIRED TO SUPPLY 3 ADDITIONAL COPIES OF YOUR COMPLETED PACKAGE

(ORIGINAL & 3 COPIES) AT THE TIME YOU FILE~ AND THIS FORM MUST BE COMPLETED IN IT'S ENTIRETY~

Date Received

1 TAX PAYER INFORMATION

A Name(s) of Assessed Owner

B Name(s) and Status of Applicant (if other than Assessed Owner):

PROVIDE YOUR EMAIL ADDRESS IF YOU WOULD PREFER TO RECEIVE CORRESPONDENCE VIA EMAIL @ PLEASE PRINT CLEARLY

Subsequent Owner (Acquired Title after December 31, 2009)

Administrative/Executor Lessee Mortgagee Other (specify)

C Mailing Address Telephone #

D Previous Assessed Value \$ E New Assessed Value \$

2 PROPERTY IDENTIFICATION: Complete using information as it appears on your tax bill. RESIDENTIAL TYPE COMMERCIAL

A Tax Bill Account # PLAT LOT

B Location:

C Real Estate Tangible Date Property Acquired Purchase Price \$

Total Cost of Improvements\$ Amount of Fire Insurance on the Building? \$

3 REASON(S) ABATEMENT SOUGHT: Check reason(s) abatement is warranted and briefly explain why it applies (continue explanation on attachment if necessary)

CAN NOT USE ANY PROOF THAT OCCURS AFTER 12/31/2008

Overvaluation Incorrect Usage Classification Disproportionate Assessment Other (Specify)

Applicant's Opinion of Value \$ FAIR MARKET VALUE

Explanation

4 Have you filed a true and exact account this year with the City Assessor as required by law? Yes No

(A complete listing of personal property and real estate owned by you as of December 31, 2009-to be filed annually Jan 1-Jan 31)

5 Comparable Properties that support your claim (you may attach additional sheets if necessary).

Table with columns: Address, Sale Price, Sale Date, Property Type, Assessed Value

6 Signature of Applicant(s) Date

Signature of Authorized Agent Date

THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAXES. TO AVOID THE ADDITION OF INTEREST AND OTHER COLLECTION CHARGES, THE TAX SHOULD BE PAID AS ASSESSED ON THE DUE DATES.

PLEASE READ THESE INSTRUCTIONS IN THEIR ENTIRETY AS THIS FORM HAS BEEN UPDATED FROM PREVIOUS VERSIONS. YOU MUST USE THE NEW FORM FY 2010-OLDER VERSIONS WILL NOT BE ACCEPTED. PLEASE READ THE RULES/GUIDELINES IN REGARDS TO THE HEARING PROCESS AS SOME OF THE RULES HAVE ALSO CHANGED.

Only ONE (1) property per appeal application

1 A. FULL NAME OF TAX PAYER (ASSESSED OWNER)

B. NAME AND STATUS OF APPLICANT-(**IF OTHER THAN ASSESSED OWNER ABOVE**)

C. MAILING ADDRESS-WHERE YOU WOULD LIKE CORRESPONDENCE MAILED TO IN REGARDS TO THIS APPLICATION
(**THIS WOULD ALSO INCLUDE YOUR REPRESENTATIVES ADDRESS IF THEY ARE TO RECEIVE THE MAILINGS**)
TELEPHONE #-VALID PHONE # IN CASE WE NEED TO CONTACT YOU IN REGARDS TO A HEARING CHANGE
EVEN IF YOU CHOSE TO HAVE DOCUMENTS EMAILED-WE STILL REQUIRE A MAILING ADDRESS & PHONE #

D. PREVIOUS ASSESSED VALUE (2009 TAX ASSESSMENT)

NEW ASSESSED VALUE (2010 TAX ASSESSMENT) (**AMOUNTS MAY BE THE SAME**)

2 A. TAX BILL ACCOUNT #-ACCOUNT # ASSIGNED TO YOUR PROPERTY AND IS LOCATED ON YOUR TAX BILL.
REALS ESTATE ACCOUNTS BEGIN WITH "R" TANGIBLE ACCOUNTS BEGIN WITH "T"

PLAT/LOT-CAN BE FOUND ON YOUR TAX BILL.
TYPE: CHOOSE ONE TYPE ONLY PER APPEAL

B. LOCATION-**LEGAL** PROPERTY ADDRESS AS SHOWN ON YOUR TAX BILL

C. CHECK IF THIS A REAL ESTATE ACCOUNT OR A TANGIBLE ACCOUNT

DATE YOU ACQUIRED PROPERTY (**REAL ESTATE ONLY**)

PURCHASE PRICE-THE AMOUNT YOU PAID FOR PROPERTY (**REAL ESTATE ONLY**)

TOTAL COST OF ANY IMPROVEMENTS MADE (**IF APPLICABLE**)

AMOUNT OF FIRE INSURANCE (**REAL ESTATE ONLY**)

3 **CAN NOT USE ANY PROOF THAT OCCURS AFTER 12/31/2008**

CHECK THE REASON FOR SEEKING THE ABATEMENT

YOUR OPINION OF VALUE

CHECK REAL ESTATE CLASS-EITHER COMMERCIAL OR RESIDENTIAL

BRIEF EXPLANATION AS TO WHY YOU FEEL YOUR ASSESSMENT IS INCORRECT

4 TRUE AND EXACT ACCOUNT-ANSWER YES OR NO. (THE ASSESSOR'S OFFICE HAS ALL T&E RECEIVED ON FILE)

A complete listing of personal property and real estate owned by you as of December 31, 2009-to be filed annually Jan 1-Jan 31

5 COMPARABLE PROPERTIES THAT YOU THINK SUPPORT YOUR CLAIM (YOU MAY ATTACH ADDITIONAL SHEETS
IF NECESSARY

6 SIGNATURE OF TAXPAYER-AND DATE SIGNED

SIGNATURE OF AUTHORIZED AGENT-**IF APPLICABLE**

It is NOT the job of the Tax Assessor's office to review your documentation to ensure you have completed packages. We review your application for key areas only. We DO NOT make sure you have enough copies, appraisals, if you have supplied enough proof, etc. You CANNOT add to your package once it is received in this office. The Board MIGHT accept additional items at your hearing however this is NOT recommended as you have 10 minutes to state your case. If you choose to bring items to your hearing, you are essentially not giving the Board enough time to review your complaint.