Assessor's Use Only
Proof of Residency

☐ Voter Registration

☐ RI Tax Forms

City of Newport
Office of the
Tax Assessor

APPLICATION FOR VETERAN EXEMPTION

Assessor's Use Only

☐ Added to OPAL

☐ Cover Sheet/Card

Must be filed in the Tax Assessor's office prior to March 15th

Name _____
Last First Middle

Spouse _____
Last First Middle

Applicant's Date of Birth _____ SSN _____

Spouse's Date of Birth _____ SSN _____

Current Address _____

List any other State/Community where you have filed for Veteran's Exemption

_____

Branch of Service: _____

Check Applicable Box(es): ☐ WW2 ☐ Vietnam ☐ Korea ☐ Grenada ☐ Lebanon
☐ National Guard ☐ Women's Air Force Pilot ☐ Widow(er) of Veteran
☐ Gold Star Parent

_____
ASSESSORS USE ONLY

Date of Entry _____ Discharge Date _____

I request that my exemption be applied against the following:

Real Estate located at _____

_____ _____
Plat Lot

Business located at _____ Account# _____

Automobile: Year _____ Make _____ Model _____

Plate # _____ Driver License # _____

I do hereby swear/affirm that the answers to the above questions are true to the best of my knowledge. I further acknowledge that if I become a resident of another state, receive a Veteran, Homestead or other like exemption, I will no longer be eligible for this exemption in this state.

_____ _____ _____
Signature Date Assessor or Notary

Requirements

1. Be a legal resident of Rhode Island and not receive an exemption in any other community or any other state.
2. Pay Rhode Island Income Tax **(Please attach a legible copy)**
3. **Provide a copy of DD214 or other such documents as proof that the applicant served during time of conflict** (see attached list)