

TOWN OF HOPKINTON

1 Town House Road
Hopkinton, RI 02833



Applicant's Name: \_\_\_\_\_

Property Location: \_\_\_\_\_

Assessor's Map # \_\_\_\_\_ Lot # \_\_\_\_\_ or Registration # \_\_\_\_\_

Exemption being applied for : Veteran Widow of

Spouse's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

An exemption from taxation in the amount of six thousand, seven hundred dollars (\$6700) of the assessed value is hereby claimed by RIGL 44-3-4, and amendments thereto.

Date of Enrollment in Military: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Name of Veteran (if deceased) \_\_\_\_\_

By signing below, I certify that I am not receiving a Veteran's Exemption from any other town, city or state.

Signature of Applicant: \_\_\_\_\_

Veteran must have been Honorably Discharged from the Military and served in specific conflicts or locations or earned certain medals to qualify. Please see our office for details.

Notary Public

County of: \_\_\_\_\_

State of: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

My commission expires: \_\_\_\_\_

Signature of Notary or Tax Assessor Staff

Assessor Use Only

Qualifying Conflict: \_\_\_\_\_

Qualifying Medal: \_\_\_\_\_

Approved Denied

If denied, reason: \_\_\_\_\_

Assessor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_