HOPKINTON, RHODE ISLAND
CAMPER VALUATION REPORT

To be completed and returned by February 15, 2020

INSTRUCTIONS: The existing Rhode Island Statute (Title 44-4-24) requires the Assessor to assess all trailers stored at campgrounds in Hopkinton, as of December 31, 2019, regardless as to where they are registered.

The following information shall be provided to the Assessor each year for the purpose of properly assessing your trailer. Please fill out completely and retain a copy for your records.

Failure to return this form by February 15, with all of the information as shown below, will leave the assessment to the discretion of the Assessor.

NAME OF OWNER ___________________________________________________________________

RESIDENCE ____________________________________________________________________

MAILING ADDRESS (IF DIFFERENT) ___________________________________________________________________________

DESCRIPTION OF CAMPER: MAKE __________________ MODEL __________________ MODEL # __________________

YEAR ______ CIRCLE ONE: 5TH WHEEL  TRAVEL TRAILER  PARK MODEL  MOTOR HOME  POP-UP

LENGTH _______ WIDTH _______  # OF SLIDES __________ CIRCLE ONE:  LOFT  DOUBLE LOFT

REGISTRATION # ______ STATE ______ TAX TOWN __________ ATTACH COPY OF CURRENT REGISTRATION

ADDITION SIZE _______ DECK SIZE _______ SCREEN PORCH SIZE ______________________________

NAME OF CAMPGROUND __________________________ SITE # ______ DATE ARRIVED AT CAMPGROUND_______

OWNER’S SIGNATURE ________________________________________________________________

PHONE NUMBER ________________________________________________________________

EMAIL ADDRESS ________________________________________________________________

DATE ________________________________________________________________

MAIL TO: TAX ASSESSOR’S OFFICE  OR EMAIL TO: tzartman@hopkintonri.org  OR FAX TO: 401-377-7788
TOWN HALL
1 TOWN HOUSE RD
HOPKINTON, RI 02833
ATT: TAX ASSESSOR

IF YOUR CAMPER HAS BEEN SOLD OR REMOVED FROM THE CAMPGROUND, PLEASE COMPLETE THE FORM, SIGN YOUR NAME AND NOTE THE DATE OF SALE OR REMOVAL.

NEW OWNER ___________________________________________ SALE DATE _______________

ADDRESS ____________________________________________________________________________