CITY OF WOONSOCKET
STATE OF RHODE ISLAND

RULES & REGULATIONS FOR EXEMPTION FROM PROPERTY TAXES TO PERSONS 65 OR MORE YEARS OF AGE

In order to qualify for an exemption from taxes on real property, the following rules and regulations must be strictly adhered to:

1. The application for exemption form must be filed with the Assessor on or before **JANUARY 31ST** of **EACH** year. Said exemption shall be applied to the assessment of the following fiscal year.

2. Applicants must be a full or partial owner of a single-family residential property in Woonsocket

3. Applicants must be 65 or more years of age.

4. Applicants must legally reside in Woonsocket, and must have resided in this city for a period of one year ending with the date of assessment **DECEMBER 31ST** for the year for which exemption is claimed (the year following the date of assessment).

5. No income producing property, residential or otherwise, owned and occupied by any person 65 or more years of age shall be entitled to an exemption.

6. Only one (1) exemption will be granted to co-tenants, joint tenants, and tenants by the entirety even though all of said co-tenants or tenants by the entirety are 65 years of age or over and all occupy said property.

7. Tax Assessor's Application for exemption form must be filled out in its entirety, and sworn to before person legally qualified to administer oaths.

8. The burden of proof of all requirements shall be with the applicant, and the Assessor may require the submission of certified proof of place and date of birth, voter registration, period of abode, the physical fact of actual habitation.

9. For the purposes of this exemption, residence shall mean the actual place of abode, the physical fact of actual habitation.

10. All exemptions shall terminate upon the conveyance of the exempted property, death of the person receiving the exemption or the moving of the person from the City of Woonsocket.

11. No exemption from taxation on the valuation of real property, as herein provided, shall be allowed except upon written application thereof, which application shall be on a form prescribed by the Assessor. The Assessor may, at any time, inquire into the right of a claimant to the continuance of an exemption hereunder, and for this purpose he may require the filing of a new application or the submission of such proof he shall deem necessary to determine the right of a claimant to continuance of such exemption.

12. The combined gross income of said applicant, and his or her spouse will be less than **THIRTY THOUSAND DOLLARS ($30,000)** in each year for which an exemption is applied.

13. **COPIES** of both State & Federal Tax Forms must be included along with this, or a **SOCIAL SECURITY BENEFIT STATEMENT, FORM SSA-1099.**

QUALIFICATIONS: If you:

a. Are full/partial owner of a single-family residential property in Woonsocket.
b. Are 65 years of age or older.
c. Have owned and occupied property in Woonsocket for one (1) year
d. Are legally domiciled in the City of Woonsocket at present.
e. Have a combined (yourself & your spouse) gross income of $30,000 or less.

You may qualify for a 2016 exemption credit in the amount of $438.96 of taxes on such property.

ATTENTION: **You must file an application with the Tax Assessor, (EVERY YEAR) no later than January 31st to receive an exemption.**

Name of Applicant (Owner or Part Owner) | Address (of qualified property)

Applicant's Birthdate | Marital Status | Date Property Purchased

Name of Spouse | Spouse's Birthdate | Your Social Security No.

Spouse's Social Security No.

Do you share ownership of this property with anyone other than your spouse? **YES**_____**NO**_____

If yes, give names of other owners & **Your** share %

INCOME: (If married, include income of spouse) during last completed calendar year from January through December.)

Wages	$	Capital Gains	$
Dividends	$	Gifts, Inheritances	$
Interest	$	Rents or Royalties	$
Social Security (FICA)	$	Farm Income	$
Pensions, Annuities, Retirement Benefits	$	Assistance from Family Other	$
Business Income	$		
Subtotal	$	**TOTAL INCOME**	$

AFFIDAVIT (To be signed only in presence of a qualified Notary)

The above-named applicant, being duly sworn, deposes and says that the above statements are true and complete and claims exemption under the applicable provisions of the laws of the State of Rhode Island and the ordinances of the City of Woonsocket. The above-named applicant is also aware of the penalty for making false affidavit.

State of Rhode Island | County of Providence | City of Woonsocket | Signature of Applicant

X

Subscribe and Sworn to before me: | Date | Signed (Notary Public)

AUTHORIZATION (The following space is for the Tax Assessor's use only)

Date Application Received:

PLAT: **LOT:** **FILE:**