

Date application received:

**OFFICE OF THE ASSESSOR
TOWN OF LITTLE COMPTON
PO BOX 226
LITTLE COMPTON, RI 02837**

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APPLICATION FOR ABATEMENT OF MOTOR VEHICLE TAX

Must be filed with the Assessor on or before December 15, 2017

File separate sheets for each motor vehicle
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Name(s) of owner of record (as appears on tax bill): _____

Account number: _____ Telephone number _____

Mailing address: _____

Vehicle Information

Make: _____ Model: _____ Year: _____

I hereby appeal the excise value of \$ _____ on my motor vehicle established by the Town of Little Compton.

A copy of the **TAX BILL MUST** accompany this abatement form. My request is based on the following:

Please note: Under the General Laws of the State of Rhode Island, Section 44-34-11, Subsection C (I-II-III-IV) there are **NO** provisions to permit adjustment of the excise value due to either physical condition, high mileage or cost of acquisition.

Owner's best estimate of motor vehicle value: \$ _____

SUBSCRIBED this _____ day of _____ AD _____ under penalties of perjury

Signature of Applicant:

Before me: _____

Notary Public

THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAX. TO AVOID THE ADDITION OF INTEREST AND OTHER COLLECTION CHARGES, THE TAX SHOULD BE PAID AS ASSESSED. REFUND WILL FOLLOW IF ABATEMENT IS ALLOWED.