

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

APPLICATION FOR VETERAN'S EXEMPTION

Name _____ Service No. _____

Permanent Home Address _____

Previous Address _____

How long have you lived in Little Compton? _____ IN RI _____

Have you applied for Vets Exempt in any other community at any time? _____

If so, where? _____

Are you registered to vote in RI? _____

If so, where? _____

Active service or Honorable Discharge-US _____

Name of Veteran _____

Date of Entry _____ Date of Discharge _____

I certify that I own or have possession of taxable property which I value as follows:

Real Estate \$ _____

Motor Vehicle \$ _____

In accordance with Title 44 Chapter 3 Section 4, of the General Laws as amended, I request an exemption on the above property as follows:

Real Estate \$ _____

Motor Vehicle \$ _____

I, the undersigned _____ do hereby swear or affirm that the information provided above is true to the best of my knowledge and belief.

Signature

Notary

Date

Assessor

Approved

Denied

This form must be accompanied by a copy of Active ID or Discharge Papers.