

**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 _____
Marital status _____, if so, to whom _____
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.