



**CITY OF WOONSOCKET
RHODE ISLAND**

**APPLICATION FOR PRORATED
HOMESTEAD EXEMPTION**

Date of Application: _____ **Tax Year:** _____

Property Owner: _____ **Contact telephone:** _____

Property Location: _____ **Mailing Address:** _____

Property Classification (1, 2, or 3 family): _____

Date of Purchase: _____

Dates property owner has resided at property location: _____

Please provide proof of residency, including, but not limited to, the following:

Valid RI driver's license

Motor Vehicle registration

Voter Registration Card

Federal or State tax returns

Signature of owner: _____ **Date:** _____

Approved by City Assessor: _____ **Date:** _____