

Acct #:

Exemption begins in:

# Town of North Kingstown, Rhode Island

## Veteran Tax Exemption - Application

(Application Deadline is March 15th)



( staple here )

Pursuant to Rhode Island General Laws and the Town of North Kingstown's Ordinances, this application is for the entitlement of a Veteran Tax Exemption.

North Kingstown Veteran's Tax Exemption ordinance is available upon request.

**Must apply on or before March 15th in the year this exemption is to take effect.**

**PLEASE CHECK OFF WHAT EXEMPTION(S) YOU ARE APPLYING FOR AND PROVIDE INFORMATION REQUESTED: License and DD-214 Must be presented**

> **Veteran:** (or un-remarried widow)

✓	Conflict	Qualifying Dates	Your Service Dates
	World War I	1914-1918	To - From:
	World War II	12/7/1941 - 12/31/1946	To - From:
	Korean War	6/27/1950 - 1/31/1955	To - From:
	Vietnam War	12/22/1961 - 5/7/1975	To - From:
	Grenada or Lebanon Conflict	Orders in Arena	To - From:
	Persian Gulf-Desert Storm	Orders in Arena	To - From:
	Haitian/Somalia/Bosnian	8/2/1990 - 5/1/1994	To - From:
Please see Bill No. 6728 for other Wars and Conflicts that may qualify			
	<b>Campaign Ribbon, Expeditary Medal Earned</b>		

> **Other Veteran Exemptions**

✓	Exemption Available	Document Attached
	Prisoner of War - Classified by the Veteran's Administration	
	Gold Star Parent - Loss of serving child during qualified dates	
	Totally disabled due to service in armed forces 100%	
	Modified Home - Home modified due to service disability	
	Modified Home - Purchased with a V.A. Housing Grant	

**Assessor's Office Clerk: Verify all documentation provided and initial here:**

> **Applicant Information:** S.S #: \_\_\_\_\_  
**Name:** \_\_\_\_\_ **D.O.B:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Plat/Lot:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_ **Phone#** \_\_\_\_\_

All exemptions qualified for shall be applied to any Real Estate owned by you unless either you inform the Assessor's office of other options or you only own a motor vehicle registered in the Town of N Kingstown.

**Motor Vehicle Information:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_  
 Registration Number: \_\_\_\_\_ License Number: \_\_\_\_\_

**Other Information if needed:** \_\_\_\_\_

By signing this application, you swear that the information provided is true and accurate. Additionally, you are a resident of North Kingstown and do not claim any of these exemptions in any other Rhode Island municipality.

**Signature of Applicant:** \_\_\_\_\_

**THANK YOU FOR YOUR SERVICE TO OUR COUNTRY!**

**Tax Assessor's Approval:** \_\_\_\_\_  
 Tax Assessor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Last Name:

VETERAN EXEMPTION - APPLICATION