

**INCOME BASED EXEMPTION**  
**(OWNER/OCCUPIED PROPERTY)**  
NORTH KINGSTOWN ASSESSOR'S OFFICE

**SECTION 1:**

APPLICANTS NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

CO-OWNERS NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

OTHER RESIDENTS NAMES: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PLAT \_\_\_\_\_ LOT \_\_\_\_\_ LOCATION \_\_\_\_\_ DATE PURCHASED \_\_\_\_\_

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**INCLUDE COPY OF DRIVER'S LICENSE FOR PROOF OF AGE**

**SECTION 2: INCOME BASED SECTION - BASED ON 2022 HOUSEHOLD INCOME - STATEMENT OF INCOME**

*The above information and this portion needs to be filled out if you are applying for the income based exemption.*

INCOME: (Include income for all residents of the property for which exemption is being claimed.)

1. Wages, salaries, tips, fees, self-employment income for all household residents (1) \_\_\_\_\_  
(attach W-2 or 1099 form)
2. Pensions & Annuities for all household residents-attach proof yearly amount (2) \_\_\_\_\_
3. Social Security and Supplemental Social Security for all household residents (3) \_\_\_\_\_
4. Interest, Dividends, Capital Gains, IRA Distribution, Reverse Mortgage Payments (4) \_\_\_\_\_
5. Unemployment Benefits, Alimony, Child Support, Monetary Gifts (5) \_\_\_\_\_
6. Income from Business/Farm/Rental for all household residents (6) \_\_\_\_\_
7. Insurance Benefits, Sale of Property Income (7) \_\_\_\_\_

Total Household Income \_\_\_\_\_

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**SECTION 3: All applicants must fill out the following, sign, and have the form witnessed.**

I hereby swear under penalty of perjury that I am a legal resident of the Town of North Kingstown since \_\_\_\_\_ . I further swear and affirm that I am not receiving any elderly and/or homestead exemption in any other Town, City, or State. I do hereby swear or affirm that the above information is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Applicant                      Telephone Number                      Notary Public/Witness                      Date

ASSESSOR USE ONLY:

-- Tax Roll: \_\_\_\_\_                      Income: \_\_\_\_\_                      Exemption amount: \_\_\_\_\_