TOWN OF BURRILLVILLE

TAX ASSESSOR'S OFFICE 105 Harrisville Main Street Harrisville, RI 02830 - 1499



Phone (401) 568-4300

Application for Senior Exemption

Name of Applicant	
Address	
Mailing Address (If different)	
Phone:	Age as of December 31 st :
Birth Date:	Identification:
Account #	Map/Lot:
requirement. A renewal application must be returned by December Burrillville for 3 years prior to find December 31st and occupy the domicile). Receiving a homest	ng at the property must meet the eligibility ation must be made each year. The application or 31st. You must own residential property in application, be 62 years of age as of e property as your primary residence (legal ead or senior exemption in another town or u from receiving the exemption in Burrillville. Only granted for each property.
This application has been prepared or to the best of my knowledge all of the qualifications are met.	examined by me. Under the penalties of perjury, I declare that information provided is accurate and all the above
Signature	Date