

# TAX STABILIZATION APPLICATION FOR NEW CONSTRUCTION - RIGL 25 - 48



**Town of Burrillville**  
*Application For Tax Stabilization*  
105 Harrisville Main Street  
Harrisville, RI 02830

(401) 568-4300 x 126

This application shall expire after twelve (12) months from the date the application is received if no work has commenced on the subject property seeking tax stabilization.

## Property Owner Info

Owner Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

## Property Address Applying for Tax Stabilization

Plat/Lot: \_\_\_\_\_

Property Location: \_\_\_\_\_

Is the property currently vacant? ☐ Yes ☐ No (If no, please answer the next question)

Is the existing structure(s) in code compliance? ☐ Yes ☐ No

Please describe the use of the property and/or the type of business currently operating from this location:

## Project Description

Describe work to be preformed: \_\_\_\_\_

Describe the benefits of the proposed new construction to the Town. \_\_\_\_\_

### Project Description

If the use of this property and/or business currently operating from this property will change, please describe in detail: \_\_\_\_\_

Project start date: \_\_\_\_\_ Completion date: \_\_\_\_\_

Estimated cost of new construction: \$ \_\_\_\_\_

I have received a copy of the Tax Levy & Stabilization Ordinance. (initial here →) \_\_\_\_\_

The application fee in the amount of \$50.00 is non-refundable.

Applicant's Signature \_\_\_\_\_

\_\_\_\_\_ Date

### FOR OFFICE USE ONLY

Tax Assessor Signature \_\_\_\_\_

\_\_\_\_\_ Date

Town Planner Signature \_\_\_\_\_

\_\_\_\_\_ Date

Town Building Official Signature \_\_\_\_\_

\_\_\_\_\_ Date

☐ \$50.00 Application Fee Paid

Payment Method: \_\_\_\_\_

☐ Referred to Town Council on \_\_\_\_\_ (If applicable)

☐ Tax Stabilization Approved

☐ Tax Stabilization Denied

☐ Tax Stabilization Expired

Reason for denial: \_\_\_\_\_

Amount of Tax Stabilized, if approved: \_\_\_\_\_