

Town of Bristol, Rhode Island

Veteran Exemption Application Form Exemption Amount: \$227.00 - \$484.50

Qualifications: Applications for the exemption must be submitted prior to March 15th of the current calendar year.

Applicant's Full Name:	Date of Birth:	
Driver's License #:	State Issued I.D. #:	
Email Address:	Phone Number:	
Spouse's Name:	Date of E	Birth:
Property Address:		
Are you a legal resident of Bristol?	Yes:	No:
Are you registered to vote in Bristol?	Yes:	No:
Are you receiving any other exemptions?	Yes:	No:
If yes, please specify:		
Apply Exemption To: Motor Vehicle:	Real Estate:	
Please provide a copy of yo	ur DD214 and Driver's I	icense.
By signing below, I swear that the information of my knowledge. I further understand that stood of this application and the state of this application and the state of the sta	•	e may result in the denial
Signature of Applicant:		Date:
Signature of Spouse:		Date:
For Tax Ass	sessor's Use Only	
Account Number:	Plat:	Lot:
Approved: Denied: Signatu	re:	Date: