2025 HOMESTEAD CERTIFICATION

Dear Homeowner:

Please fill out this Homestead Exemption Certification Application. This application must be properly filled out accompanied by the required proof of occupancy. Incomplete forms will be returned to the homeowner and could cause a delay in receiving the homestead exemption for this coming tax year.

The Rhode Island General Laws and the Johnston Town Code mandate that all owner-occupied residents must apply for this exemption for it to be applicable. This form must be returned to the Tax Assessor's Office no later than April 15, 2025.

HOMESTEAD EXEMPTION (Must Be Owner Occupied)

To qualify, you must:

- 1) Own {Be a natural person(s) holding legal title} and reside in the residence (home) as of December 31, 2024.
- 2) Be a permanent Johnston resident as of December 31, 2024.
- 3) The residence is my principal residence and I (and/or spouse) do not claim any other residence to my principal residence.

Required proof of residency:

To file properly, all owners who qualify for the exemption **MUST** file by mail or in person with the Tax Assessor's Office, 1385 Hartford Ave., Johnston, RI 02919. **Please return the enclosed declaration of Homestead and a copy of three (3) of the following for proof of residency. An updated Rhode Island driver's license or Rhode Island State ID and an updated vehicle registration are mandatory. Failure to include the required three forms will result in a delay in receiving the homestead. The application form must be notarized. If you wish to receive a date stamped copy of your homestead application, please supply the town with a self-addressed stamped envelope.**

Rhode Island Driver's License (mandatory) or Rhode Island State Identification card (mandatory)

Rhode Island Vehicle Registration (mandatory)

Federal and State Tax Return

Homeowner's Insurance (declaration page)

Note: The Tax Assessor may require additional information, which he/she deems necessary to carry out the intent of the ordinance.

If the taxpayer knowingly gives misinformation as to the ownership and/or occupancy of the real estate on his/her application for a homestead exemption, the Tax assessor may, in such event, remove the homestead exemption and supplement the tax for the period in question and in addition, charge the taxpayer the maximum interest permitted by law. Fraudulent information on homestead applications will result in permanently losing the homestead exemption.

Town of Johnston

Certification of Homestead Exemption

Name:	Date: _		<u>-</u>
Address:	Plat	Lot	Unit
Co- Owner(s) Name:			
To the Town of Johnston Tax Assessor: This is my DECLARATION OF HOMESTEAD in the Town of Joh		at I am filing	this day.
I hereby declare that I reside in and maintain a place of aboo	de at:		
Which place of abode I recognize and intend to maintain as a another place or places of abode in some other city, town or described residence and above in the Town of Johnston conshome, and I intend to continue it permanently as such. I, at bona fide resident of the Town of Johnston.	r state, I here stitutes my p	by declare t redominant	hat my above- and principle
I formerly resided at: (if you have previously resided in a diff please print the address below. If same address, please prin		ty less than	three years ago,

I understand I shall furnish proof of residence in accordance with Resolution No 2015-6, amending Resolution Nos 2007-16, 2012-9 and 2012-56.

By checking ALL of the following, AND signing	; below, I swea	ar that I/we:
Own (am a natural person(s) holding	g legal title) m	y residence (home) as of December 31, 2024
Actually reside (live) in my residence	e as of Decem	ber 31, 2024
Am a permanent Johnston residen	it as of Decem	ber 31, 2024
Am clear of any Housing Court Jud	gments as De	cember 31, 2024
I occupy my residence as my princ residence to my/our principal residence (joint	-	e, and my spouse and I do not claim any other
I/we are not receiving any other ex	xemptions in a	any other city, town or state (jointly or solely)
Under penalty and perjury of the law, I swear stated in it are true.	that I have re	ad the forgoing application and that the facts
Print Name		Signature
Telephone Number		
State of Rhode Island		
Town of Johnston		
Subscribed and sworn to before me the	day of _	
Signature of Notary Public	_	Print, Type or Stamp Commissioned Name
Commission Expires:		Commission Number: