

City of Newport
Tax Assessor's Office
43 Broadway
Newport, RI 02840

Form must be filed in the Assessor's Office between January 1 and January 31.
PLEASE SUPPLY ALL INFORMATION
PLEASE PRINT LEGIBLY

Date: _____

I, _____ residing at _____
PRINT FULL LEGAL NAME OF OWNER OR AUTHORIZED REP

Do hereby certify that the following is a true and complete list of all real estate owned by me or ratable in said City of Newport on the thirty-first day of December **20**_____ at 12 o'clock am, midnight, that the value placed against each item thereof is the full, fair, cash value at said time; and that the amount therein set against the item "indebtedness to others", was actually owned by me at that time, and does not include any liability as endorser or surety of other contingent liability as a partner in any co-partnership, nor any part of any indebtedness greater than my pro rata amount thereof. A request for an extension to **March 15** must be in writing, sent **prepaid registered or certified mail** and must be postmarked before midnight of **January 31**.

*******NO EXTENSIONS BEYOND MARCH 15 CAN BE GRANTED*******

EACH PARCEL OF RATABLE ESTATE MUST BE SEPARATELY DESCRIBED & VALUED
Real Estate (indicate Plat & Lot, Legal Address, true and fair market value)

FULL LEGAL OWNER NAME _____

PLEASE PRINT LEGIBLY

Plat & Lot	LEGAL ADDRESS	True Fair Cash Value		
		Land Value	Bldg. Value	Total Value

Signature _____

STATE OF RHODE ISLAND,

Then and there _____ personally appeared before me and made oath that the foregoing account, by _____ signed and exhibited, contains to the best of their knowledge and belief, a true and full account and valuation of all real and personal estate ratable in said City of Newport.

Notary Public _____