



Town of Coventry

FINANCE DEPARTMENT • OFFICE OF THE ASSESSOR
Kerrin Martini • Tax Assessor
1670 Flat River Road • Coventry, RI 02816
401-822-9163 • kmartini@coventryri.gov

Tax Freeze Withdrawal Request

Owner Name: _____

Co-Owner Name: _____

Property Address: _____

Parcel ID: _____

Check the requested options below:

_____ Please withdraw my Tax Freeze from the subject property.

_____ Please withdraw my \$8000 exemption from the subject property.

I, the undersigned, wish to remove the above checked exemptions from the subject property. I understand that by making this request, the subject property will no longer be eligible for the removed exemptions.

Owner: _____ Date: _____

Co-Owner: _____ Date: _____