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TOWN OF CHARLESTOWN

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2017
ASSESSMENT YEAR
REAL ESTATE
ACCOUNT FILING

Name _____

Address _____

_____

Property Location _____

Map/Lot _____

Land Value _____
Building Value _____
Total Value _____

I, _____do hereby attest that this is the claimed full value of my property for the ensuing tax year and am filing an account of such value to meet the requirements of R.I.G.L 44-5-15.

SIGNATURES:

_____ _____

Owner **Date** **Co-Owner** **Date**