OFFICE OF TAX ASSESSOR TOWN OF JAMESTOWN

APPLICATION FOR VETERAN'S EXEMPTION

(Must include copy of DD-214 Discharge Form and a copy of drivers license) $APPLICATION\ DEADLINE-MARCH\ 15^{th}$

Date:	Phone Num	ber	
1. Name			
2. Residence Address			
3. Email Address			
4. Location of proper	ty or Make/Model of	Motor Vehicle	e:
5. Are you a legal resi Have you regis			No No
	ied for a Veteran's I		nother community?
7. Do receive exempti	ons in any other con	nmunity?	
8. Branch of Military	Service in which you	u served?	
9. Date of Entry?	Date of Discharge?		
10. Do you reside at the If not, please ex	he above address for xplain		• ————
11. Single Married If married, name of	l f spouse		
Signature of	Applicant	Date	
SIGNED			
TAX AS	SSESSOR		