

**TOWN OF NORTH PROVIDENCE, RI
REQUEST FOR TAX CERTIFICATE**

UNDER 44-7-11 OF THE General Laws of Rhode Island

Taxpayer name: _____

Property Address: _____

Assessor's Plat: _____ **Lot:** _____ **Account #:** _____

Outstanding Balance (s) Assessed Prior to December 31, 2011 (2012 bill)

Real Estate Tax – Assessed December 31, 2012 (2013 bill) _____

Tax Sale Info: Sale within last 12 months? Y or N Sale Pending? Y or N Date scheduled: _____

Personal Property Tax – Assessed December 31, 2012 _____

Water Use: Seek further information

Sewer Use: Narragansett Bay Commission @ (401) 461-8848

Motor Vehicle Tax RIGL 44-7-11 (j) (SEE ATTACHED FORM)

CERTIFICATION

**THIS IS TO CERTIFY THAT THE ABOVE IS TRUE AND CORRECT, SAID CERTIFICATE IS GIVEN IN
ACCORDANCE WITH 44-7-11 OF THE GENERAL LAWS OF RHODE ISLAND 1956
AS OF THIS _____ DAY OF _____ 2014.**

Requested by: _____

Tax Collector/Authorized Representative
of North Providence

Please return this completed form along with a \$25.00 check payable to the Town of North Providence and mail or deliver to Tax Collector, Town of North Providence, 2000 Smith Street, North Providence, RI 02911

TOWN OF NORTH PROVIDENCE, RHODE ISLAND

**MOTOR VEHICLE TAXES
REQUEST FOR CERTIFICATE**

UNDER 44-7-11 (J) OF THE
GENERAL LAWS OF RHODE ISLAND 1956

RIGL 44-7-11 (j) requires that the closing agent presiding at the closing on any transfer of such real estate (including refinancing) shall collect all sums due as set forth on the motor vehicle tax certificate and transmit the same to the tax collector along with a forwarding address of the owner transferring any such real estate.

Taxpayer name: _____

Property address: _____

Assessor's Plat: _____ **Lot:** _____ **MV account #:** _____

Outstanding Balance(s) Assessed prior to December 31, 2011 _____

Motor Vehicle tax – Assessed December 31, 2012 (2013 bill) _____

Seller information:

New Address: _____

City/State/Zip: _____

Please check appropriate Item: Refinance _____ Transfer of Owner: _____

Closing Agent certification:

I certify that the information provided is correct to the best of my knowledge.

Closing Agent (Print/Type)

Authorized Representative
Town of North Providence

Signature

Please complete the section labeled “Seller information”, sign and return with Payment to the Tax Collector’s Office.