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

ANNUAL
REAL ESTATE
ACCOUNT FILING

Name _____

Address _____

Assessment Year _____

Property Location _____

Parcel ID _____

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.

SIGNATURE(S):

_____ _____

OWNER DATE OWNER DATE