

THE CITY OF PROVIDENCE  
STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

# RESOLUTION OF THE CITY COUNCIL

No. 103

*Approved* March 6, 2006

RESOLVED, That the Tax Assessor is requested to apply the  
Homestead Exemption to the property located at 192 Messer Street for the 2005  
tax roll.

IN CITY COUNCIL  
MAR 12 2006  
READ AND PASSED

PRES.

CLERK

APPROVED

3/6/06

MAYOR

IN CITY COUNCIL  
FEB 2 2006  
FIRST READING  
REFERRED TO COMMITTEE ON  
FINANCE

*Ann M. Stebbins*

THE COMMITTEE ON  
FINANCE  
Approves Passage of  
The Within Resolution

*Ann M. Stebbins*  
Clerk

2-9-06

*Councilman Allen, By Request*

# City of Providence Declaration of Homestead

2005

Plat 036 Lot 0311 Unit 0000

036-0311-0000

192 Messer St

02---2 -5 Family

To the Providence City Assessor.

This is my **DECLARATION OF HOMESTEAD** in  
the **CITY OF PROVIDENCE** that I am filing this day.



I hereby declare that I reside in and maintain a place of abode at:

192 Messer St 2  
Number and Street Apt. Or Unit #

Providence, Rhode Island 02909  
City Zip Code

Which place of abode I recognize and intend to maintain as my permanent home and, if I maintain another place or places of abode in some other CITY/TOWN or state, I hereby declare that my above-described residence and abode in the CITY of PROVIDENCE constitutes my predominant and principal home, and I intend to continue it permanently as such. I, at the time of making this declaration, am a bona fide resident of the CITY of PROVIDENCE.

I formerly resided at: (If you previously resided in a different property less than three years ago, please print the address below. If same, print "SAME").

164 Hamilton St.  
Number and Street Apt. Or Unit #  
Prov. R.I. 02907  
City, State, and Zip Code

TAX ASSESSOR'S OFFICE  
PROVIDENCE, RI  
2005 NOV 16 A 9:47

I understand that I shall furnish proof of residence (see back of form) in accordance with Chapter 2001-25 No. 398 of the Ordinances of the City of Providence.

By Checking ALL of the following boxes, AND signing below, I swear that I:

- ☒ Own [(Am a natural person(s)) holding legal title] my residence (home) as of December 31<sup>st</sup>
- ☒ Actually reside (live) in my residence as of December 31<sup>st</sup>
- ☒ Am a permanent Providence resident as of December 31<sup>st</sup>
- ☒ Am clear of Housing Court Judgments as of December 31<sup>st</sup>

Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

Candida Rodriguez  
Signature  
CANDIDA RODRIGUEZ  
Print Name  
401 273 7679  
Phone Number

State of Rhode Island

City of Providence

Sworn to and subscribed before me this 16<sup>th</sup> day of November, 2005 by the above named, who

☒ Is personally known to me or ☒ has produced the following type of ID: R.I.D.

Juan C. Funes  
Signature of Notary

Commission Expires: 1/8/06

Juan C. Funes  
Print, Type or Stamp Commissioned Name  
Commission Number: 49212

MUNICIPAL LIEN CERTIFICATE  
CITY OF PROVIDENCE - OFFICE OF THE COLLECTOR  
CITY HALL PROVIDENCE, R.I. 02903 (401) 331-5252

DATE	PLAT	LOT	UNIT	LOCATION	CERT #	PAGE
February 08, 2006	036	0311	0000	192 Messer St	42,677	1

ASSESSED CANDIDO RODRIGUEZ  
OWNER

STATUS OF REAL ESTATE BILL AS OF DATE PRINTED

YR	TYPE	ORIGINAL TAX	CHARGE	ADJUSTMENT ABATEMENT	PAID	BALANCE DUE	INTEREST	TOTAL DUE	BILL NAME
05	RE	\$2,408.24	\$0.00	(\$1,182.95)	\$1,949.16	(\$723.87)	\$0.00	(\$723.87)	CANDIDO RODRIGUEZ
		<u>\$2,408.24</u>	<u>\$0.00</u>	<u>(\$1,182.95)</u>	<u>\$1,949.16</u>	<u>(\$723.87)</u>	<u>\$0.00</u>	<u>(\$723.87)</u>	

NOTE - INTEREST SHOWN IS VALID FOR 30 DAYS FROM DATE ISSUED. ADDITIONAL CHARGES MAY APPLY IF PAYMENT IS RECEIVED LATER THAN 30 DAYS FROM DATE.

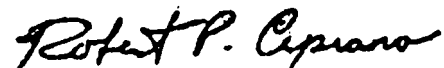
NOTE - PLEASE BE AWARE THAT UNPAID TAXES MAY BE SUBJECT TO TAX SALE.

PLEASE CONTACT THE WATER SUPPLY BOARD AT 521-6300  
PLEASE CONTACT THE NARRAGANSETT BAY COMMISSION AT 461-8828

C E R T I F I C A T I O N

THIS IS TO CERTIFY THAT THE ABOVE IS TRUE AND CORRECT, SAID CERTIFICATION BEING GIVEN IN ACCORDANCE WITH 44-7-11 OF THE GENERAL LAWS OF RHODE ISLAND 1956, AS OF THE DATE PRINTED ABOVE.

MAILED TO: City Council  
City of Providence



ROBERT P. CEPRANO  
TAX COLLECTOR

MARC CASTALDI  
DEPUTY COLLECTOR

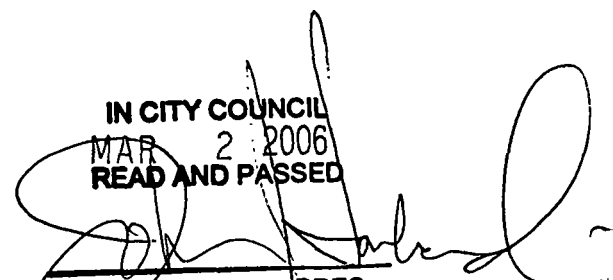
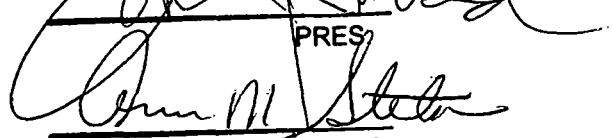
THE CITY OF PROVIDENCE  
STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

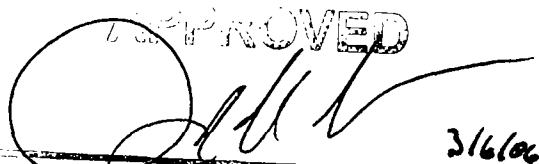
# RESOLUTION OF THE CITY COUNCIL

No. 104

*Approved* March 6, 2006

RESOLVED, That the Tax Assessor is requested to apply the  
Homestead Exemption to the property located at 77 Alvin Street for the 2005 tax  
roll.

IN CITY COUNCIL  
MAR 2 2006  
READ AND PASSED  
  
PRES  
  
CLERK

APPROVED  
  
3/6/06  
MAYOR

IN CITY COUNCIL  
FEB 2 2006  
FIRST READING  
REFERRED TO COMMITTEE ON  
FINANCE  
Ann M. Stetson

THE COMMITTEE ON  
FINANCE  
Approves Passage of  
The Within Resolution  
Ann M. Stetson  
2-9-06 Clerk

Concurrence Allen, By Request

City of Providence  
Declaration of Homestead

2005

Plat 051 Lot 0197 Unit 0000

051-0197-0000

77 Alvin St

02---2 -5 Family

To the Providence City Assessor.

This is my **DECLARATION OF HOMESTEAD** in  
the **CITY OF PROVIDENCE** that I am filing this day.



I hereby declare that I reside in and maintain a place of abode at:

77 ALVIN ST. 2  
Number and Street Apt. Or Unit #

PROVIDENCE, Rhode Island 02907  
City Zip Code

TAX ASSESSOR'S OFFICE  
PROVIDENCE, RI  
2005 AUG 10 A 11: 54

Which place of abode I recognize and intend to maintain as my permanent home and, if I maintain another place or places of abode in some other CITY/TOWN or state, I hereby declare that my above-described residence and abode in the CITY of PROVIDENCE constitutes my predominant and principal home, and I intend to continue it permanently as such. I, at the time of making this declaration, am a bona fide resident of the CITY of PROVIDENCE.

I formerly resided at: (If you previously resided in a different property less than three years ago, please print the address below. If same, print "SAME").

SAME SAME  
Number and Street Apt. Or Unit #

SAME  
City, State, and Zip Code

I understand that I shall furnish proof of residence (see back of form) in accordance with Chapter 2001-25 No. 398 of the Ordinances of the City of Providence.

By Checking ALL of the following boxes, AND signing below, I swear that I:

- ☒ Own [(Am a natural person(s)) holding legal title] my residence (home) as of December 31<sup>st</sup>  
☒ Actually reside (live) in my residence as of December 31<sup>st</sup>  
☒ Am a permanent Providence resident as of December 31<sup>st</sup>?  
☒ Am clear of Housing Court Judgments as of December 31<sup>st</sup>

Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

Lilia Fomora  
Signature  
Lilia Tavaraz  
Print Name  
(401) 383 9794  
Phone Number

State of Rhode Island  
City of Providence

Sworn to and subscribed before me this 10<sup>th</sup> day of August, 2005 by the above named, who

☐ Is personally known to me or ☒ has produced the following type of ID: RI license 9213542

Deborah L. Santos Hudson  
Signature of Notary  
Commission Expires: 12/19/06

Deborah L. Santos Hudson  
Print, Type or Stamp Commissioned Name  
Commission Number: 3867

MUNICIPAL LIEN CERTIFICATE  
CITY OF PROVIDENCE - OFFICE OF THE COLLECTOR  
CITY HALL PROVIDENCE, R.I. 02903 (401) 331-5252

DATE	PLAT	LOT	UNIT	LOCATION	CERT #	PAGE
February 08, 2006	051	0197	0000	77 Alvin St	42,678	1

ASSESSED LILIA V TAVAREZ  
OWNER

STATUS OF REAL ESTATE BILL AS OF DATE PRINTED

YR	TYPE	ORIGINAL TAX	CHARGE	ADJUSTMENT ABATEMENT	PAID	BALANCE DUE	INTEREST	TOTAL DUE	BILL NAME
05	RE	\$3,585.00	\$0.00	(\$1,659.71)	\$1,938.69	(\$13.40)	\$0.00	(\$13.40)	LILIA V TAVAREZ
		<u>\$3,585.00</u>	<u>\$0.00</u>	<u>(\$1,659.71)</u>	<u>\$1,938.69</u>	<u>(\$13.40)</u>	<u>\$0.00</u>	<u>(\$13.40)</u>	

NOTE - INTEREST SHOWN IS VALID FOR 30 DAYS FROM DATE ISSUED. ADDITIONAL CHARGES MAY APPLY IF PAYMENT IS RECEIVED LATER THAN 30 DAYS FROM DATE.

NOTE - PLEASE BE AWARE THAT UNPAID TAXES MAY BE SUBJECT TO TAX SALE.

PLEASE CONTACT THE WATER SUPPLY BOARD AT 521-6300  
PLEASE CONTACT THE NARRAGANSETT BAY COMMISSION AT 461-8828

C E R T I F I C A T I O N

THIS IS TO CERTIFY THAT THE ABOVE IS TRUE AND CORRECT, SAID CERTIFICATION BEING GIVEN IN ACCORDANCE WITH 44-7-11 OF THE GENERAL LAWS OF RHODE ISLAND 1956, AS OF THE DATE PRINTED ABOVE.

MAILED TO: City Council  
City of Providence



ROBERT P. CEPRANO  
TAX COLLECTOR

MARC CASTALDI  
DEPUTY COLLECTOR



THE CITY OF PROVIDENCE  
STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

# RESOLUTION OF THE CITY COUNCIL

No. 105

*Approved* March 6, 2006

RESOLVED, That the Tax Assessor is requested to apply the  
Homestead Exemption to the property located at 18 Claremont Avenue for the  
2005 tax roll.

IN CITY COUNCIL  
MAR 2 2006  
READ AND PASSED

PRES.

CLERK

3/6/06

IN CITY COUNCIL  
FEB 2 2006  
FIRST READING  
REFERRED TO COMMITTEE ON  
FINANCE  
Ann M. Shea CLERK

THE COMMITTEE ON  
FINANCE  
Approves Passage of  
The Within Resolution  
Ann M. Shea  
2-9-06 Clerk

Councilman De Luca, By Request

City of Providence  
Declaration of Homestead

Ward 8 2005

\* Bought home

Plat 064 Lot 0609 Unit 0000

064-0609-0000

11/16/04

18 Claremont Ave

01---Single Family



*[Handwritten signature]*

To the Providence City Assessor.

This is my **DECLARATION OF HOMESTEAD** in  
the **CITY OF PROVIDENCE** that I am filing this day.

I hereby declare that I reside in and maintain a place of abode at:

18 Claremont Ave  
Number and Street Apt. Or Unit #

PROV RI, Rhode Island 02908  
City Zip Code

TAX ASSESSOR'S OFFICE  
PROVIDENCE, RI  
2005 AUG 19 P 11:58

Which place of abode I recognize and intend to maintain as my permanent home and, if I maintain another place or places of abode in some other CITY/TOWN or state, I hereby declare that my above-described residence and abode in the CITY OF PROVIDENCE constitutes my predominant and principal home, and I intend to continue it permanently as such. I, at the time of making this declaration, am a bona fide resident of the CITY OF PROVIDENCE.

I formerly resided at: (If you previously resided in a different property less than three years ago, please print the address below. If same, print "SAME").

18 Claremont  
Number and Street Apt. Or Unit #  
PROV RI  
City, State, and Zip Code

I understand that I shall furnish proof of residence (see back of form) in accordance with Chapter 2001-25 No. 398 of the Ordinances of the City of Providence.

By Checking ALL of the following boxes, AND signing below, I swear that I:

- ☒ Own [(Am a natural person(s)) holding legal title] my residence (home) as of December 31<sup>st</sup>
- ☒ Actually reside (live) in my residence as of December 31<sup>st</sup>
- ☒ Am a permanent Providence resident as of December 31<sup>st</sup>
- ☒ Am clear of Housing Court Judgments as of December 31<sup>st</sup>

Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

Bucky Olukogor  
Signature  
Bucky Olukogor  
Print Name  
(401) 580 4304  
Phone Number

State of Rhode Island  
City of Providence

Sworn to and subscribed before me this 19th day of August, 2005 by the above named, who

☐ Is personally known to me or ☐ has produced the following type of ID:

[Signature]  
Signature of Notary  
Commission Expires 11-19-05  
notary

Gloria A. Coletta  
Print, Type or Stamp Commissioned Name  
Commission Number #17522

MUNICIPAL LIEN CERTIFICATE  
CITY OF PROVIDENCE - OFFICE OF THE COLLECTOR  
CITY HALL PROVIDENCE, R.I. 02903 (401) 331-5252

DATE	PLAT	LOT	UNIT	LOCATION	CERT #	PAGE
February 08, 2006	064	0609	0000	18 Claremont Ave	42,679	1
ASSESSSED BUKKY OLAKOGA OWNER						

STATUS OF REAL ESTATE BILL AS OF DATE PRINTED

YR	TYPE	ORIGINAL TAX	CHARGE	ADJUSTMENT ABATEMENT	PAID	BALANCE DUE	INTEREST	TOTAL DUE	BILL NAME
05	RE	\$5,282.28	\$0.00	(\$1,340.28)	\$966.59	\$2,975.41	\$238.03	\$3,213.44	BUKKY OLAKOGA
		<u>\$5,282.28</u>	<u>\$0.00</u>	<u>(\$1,340.28)</u>	<u>\$966.59</u>	<u>\$2,975.41</u>	<u>\$238.03</u>	<u>\$3,213.44</u>	

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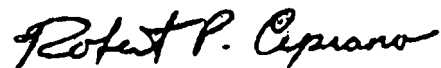
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PLEASE CONTACT THE WATER SUPPLY BOARD AT 521-6300  
PLEASE CONTACT THE NARRAGANSETT BAY COMMISSION AT 461-8828

C E R T I F I C A T I O N

THIS IS TO CERTIFY THAT THE ABOVE IS TRUE AND CORRECT, SAID CERTIFICATION BEING GIVEN IN ACCORDANCE WITH 44-7-11 OF THE GENERAL LAWS OF RHODE ISLAND 1956, AS OF THE DATE PRINTED ABOVE.

MAILED TO: City Council  
City of Providence



ROBERT P. CEPRANO  
TAX COLLECTOR

MARC CASTALDI  
DEPUTY COLLECTOR