For Collector's Use Only

Bidder No._____

CITY OF PROVIDENCE

TAX SALE DELINQUENCY AFFIDAVIT

I, _____, on oath depose and state as follows:

1. I am an individual resident, corporation, or business entity of the State of_____ having an address at _____.

2. I have personal knowledge of the facts set forth herein, except those matters stated to be upon my information and belief. I am executing and delivering this Tax Sale Delinquency Affidavit to the City of Providence/Tax Collector in accordance with the provisions of Rhode Island General Laws §44-9-13 (1956, as amended). I have read this statute and am familiar with its provisions.

3. I own, in whole or in part, real property(ies) located within the City of Providence, having the following street address(es) (if none are listed, there are NONE):

_____

_____

_____

4. I am an officer, more than 10% shareholder, partner, member or owner of the following corporation(s), partnership(s) or limited liability company(ies) (hereinafter individually or collectively referred to as the "Company"), holding the title or interest(s) indicated below, and I am authorized to deliver this Affidavit on behalf of the Company (if none are listed, there are NONE):

BIDDER *(Individual or Company Name)*:_____

MAILING ADDRESS:_____

_____

PHONE NUMBER: *HM*_____ *WK*_____ *CELL*_____

FAX NUMBER:_____**E-MAIL**_____

SOCIAL SECURITY NO./FEDERAL ID NO. _____

5. The Company owns, in whole or in part, the real property(ies) located within the City of Providence having the following street address(es) (if none are listed, there are NONE):

_____

_____

_____

_____

6. To the best of my knowledge, after diligent and good faith inquiry, neither I nor the Company is delinquent in the payment of any real estate taxes with respect to any real estate owned by me or the Company and located within the City of Providence. In situations where either I or the Company is delinquent in the payment of such taxes, either I or the Company has agreed to a written payment plan approved by the City of Providence/Tax Collector's Office and either I or the Company is current on all payments required under such plan.

7. I understand that the City of Providence has relied on the representations made by me in this Tax Sale Delinquency Affidavit to qualify either me or the Company to bid at its lien sale on May 12, 2016. I understand that ownership of a tax lien as a result of this sale will not result in a tax bill sent to me in subsequent years. I further agree to indemnify, hold harmless and defend the City of Providence as a direct result of any error or omission made by me in this Tax Sale Delinquency Affidavit, including, without limitation, any costs, fees and expenses incurred by the City of Providence in any proceeding to invalidate any lien sale in which either I or the Company is the successful bidder.

_____

(Signature)

SUBSCRIBED TO AND SWORN TO before me this _____day of _____, 2016.

_____

Notary Public
Print Name
My Commission Expires: