

AFFIDAVIT OF RESIDENCE PROPERTY HELD IN TRUST

I, (please print)	, with a mailing address
of	
	e below described real estate is held in the name
	I, as the applicant, reside at the below described
	ate taxes or any other financial responsibility for
the property.	
Address of Property:	, Foster, RI 02825
I, the undersigned, do hereby swo information is true, accurate and	ear under penalties of perjury, that the above complete.
Signature	
STATE OF RHODE ISLAND	
COUNTY OF	
In (City/Tov	vn), on this day of (Month),
	red(print name
	ne or proved through satisfactory evidence of
identification, which was	(form of identification), to be the
person executing this document in a	
	NOTARY PUBLIC
	My Commission Expires: