



APPLICATION

Real Property Tax Relief for Veterans with 100% SERVICE-CONNECTED DISABILITY

Need Assistance?
(540) 967-3432

Stacey C. Fletcher
Commissioner of the Revenue
1 Woolfolk Avenue, Ste 203
Louisa, VA 23093

APPLICANT INFORMATION

Name of Veteran (Last, First, Middle Initial)		Social Security Number
Name of Spouse (Last, First, Middle Initial)		Social Security Number
Address of Primary Residence to be Exempted from Local Real Estate Tax		
Mailing Address (if different from primary residence address)		
Home Phone	Alternative Phone	

Qualification

Certification from Veterans Administration of <u>100% Service Connected Disability</u> attached or on file with Commissioner of the Revenue?	Yes r No r
Is this property occupied as the principal residence by the qualifying veteran?	Yes r No r
Is this property occupied as the principal residence by the qualifying veteran's surviving spouse? Surviving spouse remarried? Yes r No r	Yes r No r
Is this property jointly owned by the applicant and spouse?	Yes r No r

Veteran must bring/send with the application:

1. Approved letter of disability issued by the U.S. Department of Veteran Affairs
2. Photo Identification
3. Proof of residence occupancy, such as a utility bill

Surviving Spouse should bring/send with the application:

1. Death certificate to confirm date is on or after January 1, 2011
2. A certified certificate of marriage from the appropriate State office of records
3. Proof of residence occupancy, such as a utility bill

Affidavit

Veterans: I hereby certify that the above stated physical address is occupied as my primary place of residence and I have presented to this office the original, designated U.S. Department of Veterans Affairs letter issued to me attesting that I am 100% service-connected, permanent and totally disabled. I understand I must reapply for exemption if my principal place of residence changes.

Spouse of Veteran: I hereby certify that I am the surviving spouse of the above named qualified veteran. I have presented to this office a certified copy of the veteran's death certificate confirming a date of death on or after January 1, 2011, a certified documentation of marriage to the above qualified veteran, that I continue to occupy the exempted property as my primary and principal residence, and as the surviving spouse of the eligible veteran, I have not remarried.

Signature

Date

OFFICE USE ONLY

Owner of Record:	Entry Year:		
	Tax Map #:		
	Acreage:		
	Qualifies?:	r Yes	r No
Notes/Comments:	If no, explain why:		
	Value	Exempt	Taxable
Land			
Building			
Total Assessment			
Tax Rate			
Total Taxes			

Amount of Relief	
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