



**APPLICATION  
REAL PROPERTY TAX RELIEF  
FOR VETERANS WITH  
100% SERVICE-CONNECTED DISABILITY**

***Carman Viar***  
**Commissioner of the Revenue**  
**P.O. Box 130**  
**Bland, VA 24315**

Phone Number  
(276) 688-4291  
Fax: (276) 688-3071

**APPLICANT INFORMATION**

Name: (Applicant/Owner):	Social Security #:	Phone#:
Name (Co-Owner/Spouse):	Social Security #:	Phone#:
Property Address:		Mailing Address if different than Property Address:

***CERTIFICATIONS***

Certification from Veterans Administration of 100% Service-Connected Disability attached or on file with Commissioner of the Revenue? Yes ☐ No ☐  
Is this property occupied as the principal residence by the qualifying veteran? Yes ☐ No ☐  
Is this property occupied as the principal residence by the qualifying veteran's surviving spouse? Yes ☐ No ☐ N/A ☐  
Is this property jointly owned by the applicant and spouse? Yes ☐ No ☐ (if no, please describe ownership arrangement)

**Privacy Act Notice:** Disclosure of your social security number on this form is mandatory, as authorized by the Virginia State Code Section §58.1-3017. Social security numbers are regarded as confidential, and except as otherwise provided by law, will not be disclosed for any other purpose.

I (we) declare, under penalties provided by law, that this affidavit has been examined by me (us) and to the best of my (our) knowledge and belief is true, correct, and complete.

\_\_\_\_\_  
Signature of Applicant/Owner

\_\_\_\_\_  
Signature of Co-Owner/Spouse

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Preparer (if not  
applicant)

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Date

\_\_\_\_\_  
Day time Phone Number

## IMPORTANT INFORMATION

Pursuant to Article X, Section 6-A of the Constitution of Virginia, the General Assembly exempted from taxation the real property, including the joint real property of husband and wife, of any veteran who has been rated by the U.S. Department of Veterans Affairs or its successor agency pursuant to federal law to have a 100 percent service-connected, permanent, and total disability, and who occupies the real property as his principal place of residence.

The surviving spouse of a veteran eligible for the exemption set forth in this article shall also qualify for the exemption, so long as the death of the veteran occurs on or after January 1, 2011, the surviving spouse does not remarry, and the surviving spouse continues to occupy the real property as his principal place of residence.

The veteran or surviving spouse claiming the exemption under this article shall file with the commissioner of the revenue an affidavit or written statement (i) setting forth the name of the disabled veteran and the name of the spouse, if any, also occupying the real property, (ii) indicating whether the real property is jointly owned by a husband and wife, and (iii) certifying that the real property is occupied as the veteran's principal place of residence. The veteran shall also provide documentation from the U.S. Department of Veterans Affairs or its successor agency indicating that the veteran has a 100 percent service-connected, permanent, and total disability. The veteran shall be required to re-file the information required by this section only if the veteran's principal place of residence changes. In the event of a surviving spouse of a veteran claiming the exemption, the surviving spouse shall also provide documentation that the veteran's death occurred on or after January 1, 2011.

OFFICE USE ONLY			
Owner of Record:			
Record#		Acreage:	
Qualifies? Yes <input type="checkbox"/>		Entry Year:	
No <input type="checkbox"/> If no, explain why:			
		Exempted	Taxable
Land Value:			
Building Value:			
Total Value:			
Tax Rate:			
Total Taxes:			
Amount of Relief:			