



Disabled Veteran Real Estate and/or Vehicle Tax Exemption Certification
Commissioner of the Revenue
497 Cumberland St, Room 101
Bristol, Virginia 24201
Ph: 276-645-7316 Fax: 276-645-3790

THIS APPLICATION MUST BE FILED EVERY YEAR BETWEEN March 1 AND April 30

Tax Year _____

Name of Veteran (Last, First, Middle Initial)	Social Security Number
Name of Spouse (Last, First, Middle Initial)	Social Security Number
Address of Principal Residence to be exempted from Local RE Tax (if applicable)	Account #
Mailing Address if different from Principal Residence	
Vehicle owned and primarily used by or for the veteran (if applicable):	
Year:	Make: Model:
Phone Number	Alternate Phone Number
Are you the owner of the principal residence listed above?	Yes No
Are you occupying the principal residence listed above?	Yes No
Veteran: I declare, under penalty of law, that the following statements are true and correct:	
<ul style="list-style-type: none"> - That the above stated physical address is occupied as my principal place of residence, <u>and</u> - That I have presented to this office the original, designated letter from the U.S. Department of Veterans Affairs issued to me attesting that I am 100% service-connected, permanently and totally disabled, <u>and</u> - That I understand I must <u>reapply</u> for exemption yearly and if my principal place of residence changes. 	
Signature of Veteran or surviving spouse _____ Date _____	

Instructions

Carefully review the statements in the declaration before you sign you application. With your signature, you are making a declaration, under penalty of law, that all of the statements are true and correct. Your completed application, along with the required documents, may be mailed to the Commissioner of the Revenue or delivered in person to our office location at 497 Cumberland St., Suite 101, Bristol, VA. If you have any questions about this program or need assistance, please call 276-645-7316.

- Enter the name and social security number of the disabled veteran.
- Enter the name and social security number of the spouse of the disabled veteran, if applicable.
- Enter the address of the principal residence to be exempted from the local real estate tax.
- Enter the mailing address if different from the principal residence.
- Enter the phone number and an alternate phone number including area codes.
- Answer the next two (2) questions with yes or no answers.
- Attach the two required documents (see below)

Additional Information

DOCUMENTS REQUIRED TO PROCESS CERTIFICATION

Disabled Veteran

- Certification from Veterans Administration verifying 100% service-connected permanent disability.
- Proof of principle residence status.

Surviving Spouse of a Member of the Armed Forces Killed in Action

- Affidavit issued from The Department of Defense.
- Proof of principle residence status.

Surviving spouse cannot remarry to continue exemption.

The surviving spouse must continue to reside in the qualified primary residence to continue exemption.

ENACTING LEGISLATION

VA CODE § 58.1-3219.5 EXEMPTION FROM TAXES ON PROPERTY FOR DISABLED VETERANS

VA CODE § 58.1-3219.9 EXEMPTION FROM TAXES ON PROPERTY OF SURVIVING SPOUSES OF MEMBERS OF THE ARMED FORCES KILLED IN ACTION

VA CODE § 58.1-3601 PROPERTY BECOMES TAXABLE IMMEDIATELY UPON SALE BY TAX-EXEMPT OWNER.

Any property exempt from taxation pursuant to this chapter which is subsequently sold to a person not having tax-exempt status shall immediately become subject to taxation and be assessed therefore. The tax levied for the current year shall be prorated for the remainder of the tax year.

Office Use Only

_____ 100% totally and permanently disabled with a service connected disability.
_____ Certification letter
_____ Proof of residency