



COUNTY OF ALBEMARLE

Office of the County Assessor
401 McIntire Road, Room 243
Charlottesville, Virginia 22902
Telephone (434) 296-5856
Fax (434) 296-5801

APPLICATION FOR VETERANS REAL ESTATE TAX EXEMPTION

Albemarle County Code Sec. 15-1603 Virginia Code §58.1-3219.5 and §58.1-3219.6

Applicant: _____

Spouse: _____

Street Address: _____

City/State/Zip: _____

Parcel Number: _____

Contact: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Have you received the Veteran's Real Estate Tax Exemption in any other locality? _____

If yes, name of locality: _____

Date previous property was sold/ exemption terminated: _____

Requirements for Exemption:

1. Veteran or surviving spouse must own or jointly own real property for which exemption is sought.
2. Veteran or surviving spouse must occupy property **as principal residence**.
3. Surviving spouse shall qualify only if the death of the veteran occurs on or after January 1, 2011 and the spouse does not remarry and continues to occupy the real property as his or her principal place of residence.
4. Must provide original or true copies of documentation from the **U. S. Department of Veterans Affairs (VA)** or its successor agency certifying 100 percent service-connected, permanent, and total disability or that you are being paid at 100 percent due to the fact the VA rates you as unemployable due to your service connected disabilities.
5. Must complete accompanying affidavit provided by County of Albemarle certifying eligibility.
6. Must provide information regarding any previous use of the Veterans exemption and provide proof that such exemption was terminated by the locality or that the previous property was sold.

Please note: According to Virginia Code §58.1-3219.5(C) the exemption only applies up to 10 acres. Additional acreage over 10 acres is not eligible for exemption under this law.

Filing instructions:

Submit this application, supporting documentation and affidavit to the County of Albemarle Department of Finance at the address above before April 1st for exemption to appear on 1st half real estate billing or October 1st for exemption to appear on 2nd half real estate billing.

Signature of Disabled Veteran/Spouse

Spouse

AFFIDAVIT OF DISABLED VETERAN

Having first been duly sworn, and as part of my application for tax exemption of _____ (specify address of principal residence, hereinafter referred to as the "Real Property" pursuant to *Virginia Code §58.1-3219.6*, I hereby state as follows:

1. My name is _____ (name of disabled veteran) and (if applicable) the name of my spouse, who also occupies the Real Property, is _____.
2. The Real Property is/is not (circle one) jointly owned by a husband and wife.
3. I hereby certify that I occupy the Real Property as my principal place of residence since _____.
4. The documents that I have submitted herewith from the U.S. Department of Veterans Affairs or its successor agency (a) are either the original documents or true copies thereof, and (b) demonstrate that I have a 100 percent service-connected, permanent, and total disability.
5. I was awarded a 100 percent service connected permanent disability as of _____.
6. I have / have not used my veteran's exemption in another locality. If so, the most recent locality in which I used my exemption was _____ and the date the exemption ended was _____.

Signature of Disabled Veteran

COMMONWEALTH OF VIRGINIA,
COUNTY OF ALBEMARLE,

The foregoing Affidavit was signed, sworn to and acknowledged before me this _____ day of _____, 20____, by _____.

Notary Public

My commission expires: _____

AFFIDAVIT OF SURVIVING SPOUSE OF DISABLED VETERAN

Having first been duly sworn, and as part of my application for tax exemption of _____ (specify address of principal residence, hereinafter referred to as the "Real Property") pursuant to *Virginia Code §58.1-3219.6*, I hereby state as follows:

1. My name is _____ (name of surviving spouse of disabled veteran), and the name of my spouse, who was a disabled veteran, was _____ (hereinafter referred to as "My Spouse").
2. I hereby certify that I occupy the Real Property as my principal place of residence.
3. The documents that I have submitted herewith (a) are either the original documents or true copies thereof, (b) demonstrate that My Spouse had a 100 percent service-connected, permanent, and total disability, as determined by the U.S. Department of Veterans Affairs or its successor agency, and (c) demonstrate that My Spouse's death occurred on or after January 1, 2011.
4. I have not remarried since the death of My Spouse.

Signature of Surviving Spouse of Disabled Veteran

COMMONWEALTH OF VIRGINIA,
COUNTY OF ALBEMARLE,

The foregoing Affidavit was signed, sworn to and acknowledged before me this _____ day of _____, 20____, by _____.

Notary Public

My commission expires: _____