Account #

## APPLICATION FOR TAX EXEMPTION FOR SURVIVING SPOUSE Tax Year OF A DISABLED VETERAN 2025

Kim Matthews Commissioner of the Revenue 52 West Main Street, Suite 200 Pulaski, VA 24301-5044

Please file by April 1

Real Estate (540) 980-7753

### **APPLICANT INFORMATION**

### CERTIFICATE/LETTER FROM VA 100% SERVICE-CONNECTED DISABILITY ATTACHED YES

<b>ON FILE</b>	YES 🗆
----------------	-------

NAME:	MAP NUMBER:					
Name of Surviving Spouse:	Social Security #:	Phone #:				
Name of Veteran:	Social Security #:	Date of death:				
Name of Veteran.		Date of death.				
Mailing Address if different than Street	Street Address:					
Address:						
Is this property owned by and occupied as the princ	1 I					
Is the principal residence jointly owned? Yes 🗆 No 🗆 If YES, proration of the exempted amount may apply.						
Is the qualifying applicant temporarily away from home? Yes □ No □ If YES, date he/she left home?						
Has the qualifying applicant remarried? Yes D No D If YES, date remarried?						
Code of Virginia 58.1 -3219.5 (B) The surviving spouse of a disabled 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						
and the surviving spouse does not remarry. The exemption applies without any restriction on the spouse's moving						
to a different principal place of residence. Code of Virginia 58.1-3219.9 also mentions a surviving spouse of a						
veteran killed in action and applies to tax years beginning on or after January 1, 2015.						
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, those numbers will	not be disclosed for a	ny 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 (surviving spouse)

Date

Signature of Preparer (if not applicant)

Relationship

Date

Preparer's Phone Number

**REQUIRED DOCUMENTS:** See "Application Process Information Sheet"

OFFICE USE ONLY				
Owner of Record:	Map Number:			
Qualifies? Yes INO If no, explain why:	Approved By: Date:			

	Non-Exempt	Exempt
Land Value		
Building Value		
Total Value:		
Tax Rate:		
Tax Levy		

# QUALIFYING SPOUSE APPLICATION PROCESS Information Sheet

(Real Estate)

### **VETERAN EXEMPTION**

To determine if qualified for this tax exemption our office must first evaluate the original letter issued from the United States Department of Veterans Affairs or its successor agency stating the Veteran was <u>100% Service-Oriented</u>, <u>Permanent and Totally Disabled</u>.

Only the primary residence owned by a surviving spouse of a disabled veteran or veteran killed in action is evaluated for the real estate tax exemption.

Proration of the exempted amount may apply if there are joint owners not entitled to this exemption.

A surviving spouse is NOT eligible to apply for the personal property tax exemption per Virginia Code 58.1-3668.

#### Surviving Spouse should provide the following items with the attached application:

Documentation	Real Estate Exemption	Vehicle Exemption	
Approved letter of disability issued to a qualifying Veteran by the U.S. (Federal) Department of Veterans Affairs with a VA Benefits Info section	V	n/a	
Surviving spouse letter issued by the U.S. (Federal) Dept. of Veterans Affairs or U.S. Department of Defense	×	n/a	
Photo Identification, applicant	~	n/a	
Death certificate	~	n/a	
Note: Disabled Veteran's date of death must have occurred on or after January 1, 2011			
Veteran "killed in action" has no death date requirement but the tax exemption cannot be applied prior to the effective date of <u>January 1</u> , <u>2015</u>			
A certified certificate of marriage from the appropriate State Office of Records (Only provide if a spouse is not listed on Death Certificate)	<b>√</b>	n/a	
Proof of residence occupancy (state ID, voter card, recent bank statement or utility bill)	✓ ✓	n/a	