



## TAX RELIEF FOR THE ELDERLY or DISABLED FY24 REAL ESTATE/2023 PERSONAL PROPERTY

CITY OF MANASSAS  
COMMISSIONER OF THE REVENUE  
9800 GODWIN DR  
MANASSAS VA 20110

CONTACT: TERRI MARTIN (703) 257-8298  
TMARTIN@MANASSASVA.GOV

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### GENERAL REQUIREMENTS

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*To qualify, an applicant must:*

- Be age 65 or older, OR permanently and totally disabled\* on December 31, 2022
- Own and occupy the dwelling as his/her sole residence (If applying for Real Estate Relief)
- Meet Income/Net Worth Limits (see reverse for information)

*See Reverse for Income/Net Worth Limits and other information.*

**THIS APPLICATION MUST BE FILLED OUT COMPLETELY AND RETURNED TO  
THE COMMISSIONER OF THE REVENUE BY JULY 3, 2023**

**YOU MUST APPLY EACH YEAR FOR TAX RELIEF!**

**APPLICATIONS RECEIVED AFTER JULY 3, 2023 WILL NOT BE ACCEPTED OR CONSIDERED**

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### CHECKLIST OF ITEMS TO BE SUBMITTED WITH APPLICATION

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- 2022 Federal Income Tax Return (If required to file) including all schedules for each person in the household that filed
- *IF YOU ARE NOT REQUIRED TO FILE AN INCOME TAX RETURN*, SUBMIT All W-2's & 1099-INT, 1099-R, 1099-CSA, 1099-DIV, 1099-B, 1099-MISC etc. (Social Security, Civil Service, Pensions, IRA's, Annuities, Profit-Sharing, Insurance Contracts, and other income)
- All **December 2022 ONLY** Financial and Bank Account Statements (Checking, Savings, Investments, Pensions, etc.)
- Tax Assessment and mortgage statement for any OTHER real estate (excludes your primary residence)

\*Certification by the Social Security Administration, the Veteran's Administration, the Railroad Retirement Board or affidavits by two medical doctors licensed to practice medicine in Virginia that you are permanently and totally disabled must be submitted. One of the affidavits must be based upon a physical examination.

**CONTINUED ON REVERSE**

The application must be signed in the presence of a notary. This service is available free of charge in our office to applicants. After you have completed the application and it has been notarized, mail to:

**Terri Martin, MDCR  
CITY OF MANASSAS  
PO BOX 125  
Manassas VA 20108**

**If you need assistance with completing the application, please call (703) 257-8298 to make an appointment.**

**THIS APPLICATION APPLIES TO:**

- **FY24 REAL ESTATE TAXES DUE DECEMBER 5, 2023 AND JUNE 5, 2024**
- **PERSONAL PROPERTY TAXES DUE OCTOBER 5, 2023. Tax Relief does not apply to license fees or parking fees (if applicable).**

**REAL ESTATE Income Limits**

Gross Income		Exemption	
0.00	- 34,200	->	100%
34,201	- 56,150	->	Up to \$3,400
56,151	- OVER	->	0

**PERSONAL PROPERTY Income Limits**

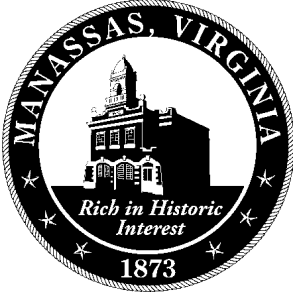
Gross Income		Exemption	
0	- 56,150	->	100%
56,151	- OVER	->	0

In determining income, the first \$10,000 of income earned by any relative living in the household other than the owner(s) or spouse is excluded.

**Net Worth Limits**

A combined financial net worth for the applicant and spouse residing in the home of **not more than \$340,000**, excluding the residence for which the exemption is sought and up to one acre of land which it occupies.

**TAX RELIEF FOR THE ELDERLY or DISABLED  
FY24 REAL ESTATE/2023 PERSONAL PROPERTY**



**DUE JULY 3, 2023**

CITY OF MANASSAS  
COMMISSIONER OF THE REVENUE  
**9800 Godwin Dr**  
MANASSAS VA 20110

Contact: Terri Martin - (703) 257-8298 - TMARTIN@MANASSASVA.GOV

RELIEF APPLYING FOR:

REAL ESTATE TAX

PERSONAL PROPERTY TAX

**YOU MUST REAPPLY EACH YEAR**

**APPLICANT: Please enter the following information:**

Applicant/Owner:

_____	_____	_____
Last Name	First Name	Middle Name
_____		_____
Date of Birth		Social Security #

Spouse or Co-Owner

**(CIRCLE ONE)**

_____	_____	_____
Last Name	First Name	Middle Name
_____		_____
Date of Birth		Social Security #

Applicant's Address:

_____	_____	_____	_____
Number and Street	Apt #	City/State	Zip Code

Phone Number:

\_\_\_\_\_

Email Address:

\_\_\_\_\_

**OFFICE USE**

RE PID# _____
ASSESSMENT _____
INCOME _____
100% _____ \$3400 _____

PPID# _____
MV INFO _____
_____
YES _____ NO _____

**Balance:**      Defer \_\_\_\_ Pay \_\_\_\_

DATE REC'D \_\_\_\_\_

**Complete the following for all other relatives (by blood or adoption) who live in the home as of December 31, 2022**

Last Name	First Name	Middle Name	Date of Birth	Social Security #	Relationship

**If you are applying for REAL ESTATE TAX RELIEF, answer the following questions:**

1. Is this residence occupied by the applicant as the sole dwelling?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Do you own any other real estate?

Yes \_\_\_\_\_ No \_\_\_\_\_

a. If yes, where is the property located and what is the estimated fair market value?

Address \_\_\_\_\_ FMV \_\_\_\_\_

b. Is the applicant sole or partial owner?

Sole Owner \_\_\_\_\_ Partial Owner \_\_\_\_\_

c. If partial owner, describe how the ownership is legally held and the applicant's interest.

3. If you qualify for a partial **REAL ESTATE EXEMPTION**, do you want to pay or defer the balance?

Pay \_\_\_\_\_ \*Defer \_\_\_\_\_

\*Deferral of taxes is defined as the portion of the taxes that is not relieved shall be allowed to remain unpaid without penalty, but must be paid within one year after the property is either sold or the qualified owner is deceased.

In the chart below, enter the **TOTAL 2022 GROSS INCOME** and assets owned as of December 31, 2022.

TOTAL FULL-YEAR GROSS INCOME	Applicant/Owner	Spouse	Other	TOTAL
Salary/Wages				
All Social Security Income (1099-SSA, Box 5)				
Pensions				
Annuity Distributions				
IRA Distributions				
Veterans Benefits/Veterans Disability				
Interest (1099-INT)				
Dividends (Income from stock)				
Capital Gains/Losses				
Business/Royalty/Rental Income				
Unemployment/Workman's Comp				
Other Income (Please List)				
Total				

ASSETS ON DEC 31, 2022	Applicant/Owner	Spouse	TOTAL
Savings Accounts			
Checking Accounts			
Money Market Accounts			
Certificates of Deposit			
Stock, Bonds, etc.			
Retirement Accounts			
IRA's			
Life Insurance – Cash Value			
Annuity – Cash Value			
Other Real Estate Owned			
Total			
Liabilities*	-	-	-
Total Net Worth			

\* Liabilities **do not include** the mortgage on the house on which you are seeking relief or credit card debt. Include mortgage on OTHER real estate and car loans.

**List all Motor Vehicles, Trailers, etc. registered with DMV and Owned on January 1, 2023. IF MOTOR VEHICLE IS LEASED, LIST THE LEASE COMPANY NAME**

Year	Make	Title Number	LEASE COMPANY

**⌘ AFFIDAVIT and AUTHORIZATION TO VERIFY RELIEF STATUS ⌘**

I \_\_\_\_\_ and \_\_\_\_\_  
do swear or affirm that the statements and figures contained in this application are true, full and correct to the best of my knowledge and belief, and I understand that any factors occurring during the taxable year for which this affidavit is filed that will result in exceeding or violating the limitations and conditions provided by Section 110-82, of the City of Manassas Code, shall nullify any exemption and/or deferral for the current taxable year and the next taxable year.

I also authorize the City of Manassas to verify RELIEF STATUS ONLY to inquiries by mortgage, title and settlement companies. I understand income, asset or any other information considered confidential will not be disclosed.

\_\_\_\_\_  
APPLICANT'S SIGNATURE DATE

\_\_\_\_\_  
CO-OWNER'S SIGNATURE DATE

**COMMONWEALTH OF VIRGINIA**

**CITY/COUNTY OF \_\_\_\_\_, TO WIT:**

I hereby certify that \_\_\_\_\_ and \_\_\_\_\_  
personally appeared before me in the City and State aforesaid, who being first duly sworn by me, acknowledge the signature to the foregoing affidavit to be his or her own and stated that on the information and belief the said statements are true and correct.

Subscribed and sworn to before me the undersigned Notary Public in my City and State aforesaid this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

\_\_\_\_\_  
Notary Public  
My Commission Expires \_\_\_\_\_  
Registration Number \_\_\_\_\_