

## **Application for Exemption of Real Estate Tax**

Date:			LRSN:		Acres:
Owner:			DOB:	SS#:	
Owner:			DOB:	SS#:	
Mailing Address:					
Name of relatives/o	thers also living	g on subject property	:		
Assets of owner(s) a List any additional l		ants: luding <u>Timeshares</u> ( <u>a</u>	attach copy of rea	ıl estate assess	ment value):
List the December copies):	31 values for S	Savings, Stocks, Bor	nds, CD's, IRA,	Mutual Funds	s, and 401K (attach
List ALL income of	owner(s) and o	other occupants (attac	ch complete copy	of federal inc	come tax return):
Applicant: Spouse: Other Occupants:	Salaries	Social Security	Retirement	Other	<u>Int. &amp; Div.</u>
		ption from Real Esta rrect. I have read and			
Owner's Signature:			Phone #	:	
Contact person (rela	ntion):		Phone #	:	
Commonwealth of County of James Ci	•				
Virginia, do hereby application, bearing personally appeared	certify that date of the before me, and	I made oath that the i	, whose day of	name is sign	ed to the foregoing ,, s true and correct:
My commissi	on expires			Notary	Public
Return this form on or	r Before <b>June 1</b> o	of each year to:	Richard W.	Bradshaw	

Commissioner of the Revenue P.O. Box 283 Williamsburg, VA 23187-0238

Phone: 757-253-6695