Alleghany County Commissioner of the Revenue
Valerie N. Bruffey, Commissioner
9212 Winterberry Avenue, Suite E, Covington, Virginia 24426
540-863-6640

Tax Year _____

APPLICATION FOR REAL ESTATE TAX EXEMPTION FOR THE ELDERLY OR PERMANENTLY AND TOTALLY DISABLED HOMEOWNERS

Completed application and supporting documentation must be returned to the Commissioner of the Revenue's office by **July 1 each year.** All information given is confidential and not open to public inspection.

Owner: _____

Mailing Address: _____
_____
_____

Property ID: _____

- Do you currently occupy the residence as your sole residence? ___ yes ___ no
  If not, where do you reside?_____
- Do you currently own other real estate? (including other states) ___ yes ___ no

List name, relationship, age, and social security number of any other persons living in residence:
_____
_____

Please submit copies of the following documentation of gross income and net worth (if applicable):

____Social Security/RR Tier I
____SSI
____RR Tier II
____Pensions
____IRA Distributions
____Capital Gains
____Interest/Dividends
____Welfare
____Rents
____Salaries/Wages
____Cash Gifts/Odd Jobs
____Trust Fund Income

____Checking Account Statement as of 12/31 of prior yr
____Savings Account Statement as of 12/31 of prior yr
____Stocks and Bonds
____IRA and 401K Plans
____Certificates of Deposit
____Other Real Estate Owned
____Other Assets
____Other Income

Note: A copy of your Federal Income Tax Return (if you are required to file) must also be included.

CERTIFICATE

I certify, under the penalties by law, that this application and supporting documentation, to the best of my knowledge and belief, is true, correct, and complete.

_____	_____	_____
Applicant's Signature	Date	Telephone Number