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Chesterfield County

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**WIDOW/WIDOWER OF 100% DISABLED VETERAN
REAL ESTATE EXEMPTION APPLICATION**

Widow or
Widower's
Name: _____ *Social Security # _____
Last First Middle

Phone #: _____ Email: _____

Name of Veteran: _____
Last First Middle

Date of death ____/____/____

Co-owner(s). List all co-owners of the property, if any. Use additional sheets if necessary.

Co-owner's
Name: _____ *Social Security # _____

Name(s) as shown on real estate tax bill: _____

Property address: _____

Co-owner address, if different: _____

**Code of Virginia § 58.1-3017. Disclosure of the social security number of a taxpayer is required for local tax administration purposes, including verification of the identity of any individual. Such numbers shall be regarded as confidential tax information.*

(Please check the appropriate)

Real Estate Manufactured Home (Mobile Home)

Is this residence occupied by the Widow/Widower as their sole dwelling? Yes No

I do hereby declare that the information included in this application, is to the best of my knowledge and belief, complete and true in all respects and that I am the owner of the property listed and occupy it as my sole residence.

Signature of Applicant

Date

GENERAL INFORMATION & REQUIREMENTS FOR ELIGIBILITY

- The veteran was alive January 1, 2011, and had a **100% service-connected, permanent, and total disability** rated by the U.S. Department of Veteran Affairs prior to or at time of death.
- Property must be owned and occupied by the widow/widower as their primary residence.
- Property owned by co-owners will receive a prorated relief based on their ownership percentage.
- Exemption is granted on the home and the land, not exceeding one acre, upon which that home is located.
- You have not remarried.

INSTRUCTIONS

1. Attach a letter from the Department of Veterans Affairs stating your spouse had a **100% service-connected, permanent, and total disability** with the **effective date** that this was determined.
2. Attach a copy of your Virginia driver's license showing your primary address.
3. Attach a copy of your spouse's death certificate.
4. Attach a copy of your marriage license.
5. If the property is owned by a trust, attach a copy of the trust.
6. This application may be submitted by mail, email, or in-person by **appointment only**. A letter confirming receipt of your application will be mailed within three weeks of receipt.

IMPORTANT

This application is subject to audit for up to three years after the year filed. Any corrections will be made by the Commissioner of the Revenue's office during this period, which can change exemption amounts for prior years.

Applicants will remain liable for all taxes due until they are notified of their approval in writing by the Chesterfield County Commissioner of the Revenue.