# KING AND QUEEN COUNTY REAL ESTATE TAX EXEMPTION TAX RELIEF FOR THE ELDERLY AND DISABLED

TAX RELIEF FOR THE YEAR \_\_\_\_\_

### Income cannot exceed \$35,000.00 Financial worth cannot exceed \$60,000.00 Maximum annual exemption is \$500.00

Name of Applic	ant:					
Social Security	#	Date of Bir	Date of Birth:			
Name of Spouse	e:					
Spouse's Social	Security #	Date of Bir	th:			
Address:						
Home Phone #:	0					
Real Estate Lis	ting:					
Map#		Land Value	Bldg Value			
	L COMBINED INC	COME FROM THE PI	RECEDING YEA	AR:		
		COME FROM THE PISpouse's income				
Relative living						
Name		Income :	\$			
	•	rom all sources)FOR				
	VES LIVING IN T NCIAL WORTH:	HE DWELLING:	\$			
		des the dwelling	\$			
		site not to exceed				
• • • • • • • • • • • • • • • • • • • •	two acres)	****************				
	DIS	SABILITY STATUS				
If you are disal	oled, list the agency	certifying your disabi	lity status:			
Agency Name:	АТТАСН А СОРУ	OF THE AGENCY'S	CERTIFICATI	ON		

## **COMBINED INCOME STATEMENT – worksheet**

My total combined income from the preceding year from all sources is as follows:

INCOME SOURCES

Wages, salaries, bonuses, commissions\$
Tips & gratuities
Dividends and other earnings from investments
Interest from bonds, loans, savings accounts
Civil Service, industrial and other pensions
Retirement compensation, annuities and endowments
Rents and royalties from property, patents, copyrights \$
Profits from business or profession
Profit from sale of real estate, securities, autos, etc
Your share of partnership profits
Your share of estate or trust income
Alimony and separate maintenance and other support payments \$
Railroad Retirement Act benefits
Virginia Supplemental Retirement Act benefits\$
State, county, city or town retirement systems benefits
Gifts, inheritances, etc
Workman's compensation, insurance damages for injury, etc \$
Life insurance proceeds
Social Security
Social Security supplements
Veteran and veteran's family benefits\$
Farm income, crops, livestock, soil banks, etc
Unemployment, welfare benefits, etc
Other social services benefits such as fuel, food stamps, etc \$
Any other income, please specify
TOTAL COMBINED INCOME \$

# FINANCIAL WORTH STATEMENT (worksheet)

Cash on hand and part interest	in banks, savings accounts, certificat	tes and t	trust fund	ls, including
			_\$	
Money due me: M	ortgages, notes, including part inter	est		
<del></del>	**************************************		_\$	
	······································		_\$	
Value of stocks, bo	onds, government bonds, life insuran	ce(cash	value), et	c.
	4		_\$	
			<b>\$</b>	
1 0 0	welling and dwelling site, not to exce cluding part interest: Titled in Whose Name	Fair	es of land Market Value	
	.,	\$		
E		\$		
		\$	9	
Other assets (e.g. t Property Form:	angible property) like those listed or	ı the Ta	ngible Pe	rsonal
Description	Titled in Whose Name		Fair M	Iarket Value
<u> </u>		2 <u>2 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 21 - 1 2</u>	\$	
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	TOTAL ASS	ETS		
				w financial
	, declare this to be a true and accura 1 <sup>st</sup> of December of the preceding yea		ment of n	iy imanciai

I, the undersigned, declare this to be a true and accurate statement of My total income during the immediately preceding calendar year from <a href="#"><u>ALL</u> sources. Any applicant making false statements to obtain tax relief under this Ordinance shall be deemed guilty of a Class 1 misdemeanor.</a>

Signature of Applicant:	
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(use a separate worksheet for spouse or each relative)

# KING AND QUEEN COUNTY VIRGINIA

THIS IS TO CERTIFY that I the understand that I must file annually; that I have listed the names of all relatives occupying my sole domicile, that the total combined net worth and the total combined income from all sources does not exceed the limits listed in the King and Queen County Ordinance and that changes in respect to income, financial worth, ownership of property or other factors occurring during the taxable year for which this Affidavit is being filed shall nullify any exemption for the current year and the taxable year immediately following:

#### **OATH**

I, the undersigned applicant, do swear (or affirm) that the foregoing figures and statements are true, full and correct to the best of my knowledge and belief.

	Signature of Applicant		
Sworn (or affirmed) to before me			
This day of	,		
Signature of Notary Public			
My commission expires:			
Reg. #			

#### **AUTHORIZATION FOR INVESTIGATION**

I hereby give my consent and permission to any governmental agency, any corporation, financial institution, retirement system or other source of income to me, to release to the Commissioner of the Revenue of King and Queen County, Virginia, any information he/she may request for the purpose of ascertaining my eligibility for relief under the "Real Estate Tax Exemption Ordinance of King and Queen County, Virginia."

	S	igned:			
			ľ	Name	
	A				
	D			-	
V	Witness if signed by ma	ark:			
	D	ate:	-	ŷ)	
Name, relationsl owner:	hip, address of person/	persons gi	ving inform	ation other t	that land
Name:		<del></del>			
Relationship:					
Address:		· · · · · · · · · · · · · · · · · · ·			
7	ber:				