

TAX RELIEF FOR VETERANS
RE-VALIDATION APPLICATION

Tax Year
2017

Randy N. Williams
Commissioner of the Revenue
P.O. Box 517
Lebanon, VA 24266

Need Assistance?
(276)889-8018

Please return by March 1

MAP NUMBER:

Name (Applicant/Owner):

Phone #:

Name (Spouse):

Mailing Address:

Street Address if different than Mailing Address

IS THIS PROPERTY OCCUPIED AS THE PRINCIPAL RESIDENCE BY THE QUALIFYING VETERAN OR
WIDOW/WIDOWER? Yes No

(we) declare, under penalties provided by law, that this affidavit has been examined by me (us) and to the best of my (our) knowledge and belief is true, correct, and complete.

Signature of Applicant/Owner

Signature of Spouse

Date

OFFICE USE ONLY

Owner of Record:

Map Number:

Qualifies?

Yes No

If no, explain why:

Qualifies as:

Veteran 100% Service Related Disability

Land Value

Building Value

Total Value: