

Your Telephone No. _____

Date Received _____

FILE EACH YEAR FOR TAX RELIEF

APPOMATTOX COUNTY

Tax Relief for Elderly and / or Handicapped

Application and Exemption Affidavit

Annually, and not later than May 1 of the taxable year, the person or persons claiming an exemption must file a Real Estate Tax Exemption Affidavit with the Commissioner of the Revenue of Appomattox County.

The head of the household occupying the dwelling and vested with title or partial title thereof must be (Check One)

___ ELDERLY: sixty-five years or older on December 31 of the year immediately preceding the taxable year.

___ HANDICAPPED: permanently and totally disable in accordance with Section 58-760.1 (a) (2) which states "If such person is under sixty-five years of age, attached a certificate by the Social Security Administration, or if such person is not eligible for social security a sworn affidavit by two medical doctors licensed to practice in the Commonwealth, to the effect that such person is permanently and totally disabled.

Please Print:

Applicant's Name: _____
Last First Middle

Birth Date: _____ Social Security No. _____

Mailing Address: _____

Name of Spouse _____
Last First Middle

Birth Date _____ Social Security No. _____

Legal Description of Property: _____

Is this residence occupied as the sole dwelling of applicant _____ YES _____ NO

List the names of all related persons to owners occupying the above residence

Name	Relationship	Social Security No.
_____	_____	_____
_____	_____	_____

Oath:

I declare under the penalties provided by law that this affidavit, any accompanying schedules and statements has been examined by me and to the best of my knowledge and belief is a true, correct and complete affidavit.

Your signature Date

Signature of Spouse Date

FINANCIAL STATEMENT AS OF DECEMBER 31, _____

1. The total combined income of the owners during the year immediately preceding the taxable year shall be determined by the Commissioner of the Revenue to be an amount not to exceed \$20,000. Total combined income shall include all income from all sources of the owners and all income except the first \$6,500 of each of the owners' relatives other than owners' spouse living in the dwelling for which exemption is claimed.

	APPLICANT	SPOUSE	RELATIVE	RELATIVE
<u>My annual income is:</u>				
<u>SALARY</u>				
<u>BONUS AND COMMISSIONS</u>				
<u>INTEREST AND DIVIDENDS</u>				
<u>RENTAL INCOME (NET)</u>				
<u>PENSIONS</u>				
<u>ANNUITIES</u>				
<u>ALIMONY -- CHILD SUPPORT</u>				
<u>PUBLIC ASSISTANCE</u>				
<u>SOCIAL SECURITY</u>				
<u>OTHER INCOMES</u>				
<u>TOTAL GROSS INCOME FOR EACH</u>				
	<u>COMBINED GROSS INCOME \$ _____</u>			

2. The net combined financial worth of the owners as of December of year immediately preceding the taxable year shall be determined by the Commissioner of the Revenue to be an amount not to exceed \$100,000. Total financial worth shall include the value of all assets, including equitable interest of the owner(s) and of the spouse of any owner.

NOTE: THE FAIR MARKET VALUE OF THE DWELLING AND THE LAND NOT TO EXCEED ONE ACRE, UPON WHICH THE DWELLING IS SITUATED NOT TO EXCEED \$75,000 IS EXCLUDED FROM THE NET COMBINED FINANCIAL WORTH OF THE OWNER.

	APPLICANT	SPOUSE	TOTAL
<u>ASSETS:</u>			
<u>Cash on hand and in bank</u>			
<u>Mortgages on Trust Notes Due Me</u>			
<u>Other Notes and Accounts Due Me</u>			
<u>Listed Stocks and Bonds</u>			
<u>Cash Value of Life Insurance</u>			
<u>Other Real Estate Owned</u>			
<u>Automobile(s)</u>			
<u>Tangible Personal Property Including Household Goods</u>			
<u>TOTAL FOR EACH PERSON:</u>			