

EXEMPTION FOR THE ELDERLY AND DISABLED APPLICATION

YEAR-2021

**COUNTY OF KING GEORGE,
KING GEORGE, VA**

APPLICATION FOR REAL ESTATE TAX RELIEF FOR THE ELDERLY

The information required on this application must be filled out in its entirety and returned to the Commissioner Of The Revenue, 10459 Courthouse Dr. Ste.101, King George, VA 22485. Applications must be filed by **March 1st** of the taxable year for which the exemption is applied. Complete all spaces on the application that are applicable. Questions that cannot be answered within the spaces provided may be answered by attaching additional sheets to this application. This exemption is granted on an annual basis and a new application must be filed each year. All information on the application is confidential and not open to public inspection. For any additional information, please do not hesitate to call our office at 540-775-4664.

| | | | |
|--|----------------------------------|-------------------|------------------------|
| Applicant: _____ | | _____ | _____ |
| Property Owner: Last Name | | First Name | Middle Name |
| Birth Date: _____ Month/Day/Year | Social Security No. _____ | | Phone No. _____ |
| Spouse: _____ | | _____ | _____ |
| Last Name | | First Name | Middle Name |
| Birth Date: _____ Month/Day/Year | Social Security No. _____ | | Phone No. _____ |
| Mailing Address: _____ | | | |

Name under which property is listed and appears on the tax bill, if different from the applicant or

Spouse's name: _____

Copy from your tax bill: Map and Parcel Number: _____
E911 Address (if same as above, write "SAME"): _____

| | | |
|----------------------|-----------------------------|------------------|
| Land Value:\$ | Improvement Value:\$ | Total: \$ |
|----------------------|-----------------------------|------------------|

RECAPITULATION

Office Use Only:

| | Income | Net Worth |
|---------------------|---------------|--|
| Owner | | |
| Owner/Spouse | | |
| Relatives | | XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX |
| | | XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX |
| TOTALS | | |

EXEMPTION FOR THE ELDERLY AND DISABLED

ITEMIZED SCHEDULE TO BE ATTACHED TO THE APPLICATION FOR EXEMPTION
OF THE COUNTY OF KING GEORGE REAL ESTATE TAXATION

NAME OF OWNER(S) _____

OWNER'S COMBINED YEARLY GROSS INCOME STATEMENT

My(Our) total combined gross income for the year 2020 from ALL sources is as follows:

| Examples of income which must be reported and proof attached along with the application: | Yearly Gross Income \$\$\$\$ |
|---|-------------------------------------|
| Wages, salaries, bonuses, commissions | \$ |
| Tips and Gratuities | \$ |
| Dividends and other earnings from investments | \$ |
| Civil service, industrial, and other pensions | \$ |
| Retirement compensation, annuities and endowments | \$ |
| Rents 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 of trust income | \$ |
| Alimony and separate maintenance and other support payments | \$ |
| Railroad Retirement Act benefits | \$ |
| Virginia Supplement Retirement Act benefits | \$ |
| State, County, City or town retirement systems benefits | \$ |
| Gifts, inheritances, devises, bequests | \$ |
| Workman's Compensation, insurance, damages for injury, etc. | \$ |
| Life insurance proceeds | \$ |
| Social Security | \$ |
| Farm income, crops, livestock, soil bank and others | \$ |
| Veteran and veteran's family benefits | \$ |
| Unemployment, welfare, etc. benefits | \$ |
| ANY OTHER YEARLY GROSS INCOME – PLEASE SPECIFY: | \$ |
| | |
| MY(OUR) TOTAL COMBINED YEARLY GROSS INCOME FOR THE YEAR OF 2020: | \$ |

OWNER'S FINANCIAL WORTH STATEMENT

My(Our) financial worth, including equitable interests as of the 31st day of December, 2020 is as follows:

| | |
|---|--------------------|
| YOUR INTEREST MARKET VALUE: | |
| Cash on hand and in banks, building & loans, savings certificates and trust funds | XXXXXXXXXXXXXXXXXX |
| including part interest: | \$ |
| Money due me – Examples are mortgages, notes, etc. including part interest: | \$ |
| Value of stocks, bonds, government bonds, etc. including part interest: | \$ |

The dwelling in which you reside and five acres of land that the dwelling occupies will be excluded but you must list what is in excess of that including part interests:

| Item: | Title In Whose Name: | Fair Market Value: | Mortgage: |
|--------------|-----------------------------|---------------------------|------------------|
| | | | |
| | | | |

| | | | |
|--------------------------------------|--|--|----|
| OTHER ASSETS: (if applicable) | | | \$ |
| | | | \$ |
| | | | \$ |

| | | | |
|----------------------|--|--|-----------|
| TOTAL ASSETS: | | | \$ |
|----------------------|--|--|-----------|

I(We), the undersigned, declare this to be a true and accurate statement of my financial condition on the 31st day of December, 2020.

(If you filed a Federal Income Tax Return last year, you must attach a copy.)

Signature of Owner(s) **Date**

**EXEMPTION FOR THE ELDERLY AND DISABLED
ITEMIZED SCHEDULE TO BE ATTACHED TO THE APPLICATION FOR EXEMPTION
OF THE COUNTY OF KING GEORGE REAL ESTATE TAXATION**

NAME OF OWNER(S) _____

NAME OF RELATIVE _____

NAME OF RELATIVE _____

RELATIVE'S COMBINED INCOME STATEMENT

My total combined gross income for the year 2020 from ALL sources is as follows:

| Examples of income which must be reported and proof attached along with the application: | Yearly Gross Income \$\$\$\$ |
|---|-------------------------------------|
| Wages, salaries, bonuses, commissions | \$ |
| Tips and Gratuities | \$ |
| Dividends and other earnings from investments | \$ |
| Civil service, industrial, and other pensions | \$ |
| Retirement compensation, annuities and endowments | \$ |
| Rents 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 of trust income | \$ |
| Alimony and separate maintenance and other support payments | \$ |
| Railroad Retirement Act benefits | \$ |
| Virginia Supplement Retirement Act benefits | \$ |
| State, County, City or town retirement systems benefits | \$ |
| Gifts, inheritances, devises, bequests | \$ |
| Workman's Compensation, insurance, damages for injury, etc. | \$ |
| Life insurance proceeds | \$ |
| Social Security | \$ |
| Farm income, crops, livestock, soil bank and others | \$ |
| Veteran and veteran's family benefits | \$ |
| Unemployment, welfare, etc. benefits | \$ |
| ANY OTHER YEARLY GROSS INCOME - PLEASE SPECIFY: | \$ |
| MY YEARLY COMBINED GROSS INCOME FOR THE YEAR OF 2020: | \$ |
| | MINUS-\$2,500.00 |
| MY TOTAL YEARLY COMBINED GROSS INCOME FOR THE YEAR OF 2020: | \$ |

I, the undersigned, declare this to be a true and accurate statement of my financial condition
on the 31st day of December, 2020.

(If you filed a Federal Income Tax Return last year, you must attach a copy.)

Relative's Signature _____ **Date** _____

Relative's Social Security Number _____

Relative's Signature _____ **Date** _____

Relative's Social Security Number _____

EXEMPTION FOR THE ELDERLY AND DISABLED

**ITEMIZED SCHEDULE TO BE ATTACHED TO THE APPLICATION FOR EXEMPTION
OF THE COUNTY OF KING GEORGE REAL ESTATE TAXATION**

1. Is this dwelling occupied by the applicant as the sole dwelling? YES NO

2. Is the applicant(s).....Owner Partial Owner

If partial ownership, explain how the ownership is legally held and the proportion owned by applicant.

3. List the names, relation, gross income (if any), ages and social security numbers of all persons related to the applicant(s) who occupy the above dwelling:

| Name | Relation | Income | | Age | Social Security No.# |
|------|----------|--------|----|-----|----------------------|
| | | Yes | No | | |
| | | | | | |
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COUNTY OF KING GEORGE,
STATE OF VIRGINIA

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

OATH – I(We), the undersigned applicant(s), 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 Owner(s) of Dwelling _____ **Date** _____

Sworn (or affirmed) to before me this _____ day of _____, 20__.

Signature of Notary Public or Other Officer Administering Oath _____ (i.e. Commissioner of the Revenue Office Signature)

KING GEORGE COUNTY
EXEMPTION FOR THE ELDERLY AND DISABLED PROGRAM

BELOW ARE “SOME” EXAMPLES OF INCOME WHICH MUST BE REPORTED
EACH YEAR. PROOF OF THE FOLLOWING MUST BE ATTACHED TO YOUR
APPLICATION WHEN FILED
IF APPLICABLE:

***Social Security Statement = 1099 Statement Reflecting amount received previous year

***Retirement Statement

***Income Tax Return Filed This Year

***1099

***W-2

***Checking Account Statement = January Statement Reflecting December 31st Balance.

***Savings Account Statement = January Statement Reflecting December 31st Balance.

***Any cash on hand

***Any rents or mortgages due you

***CD

***401K

***IRA

***Must list all Personal Property (motorcycles, motor homes, campers, utility trailers, boats, vehicles, pick up trucks, etc.)

***Must list all Real Estate owned in this county and/or another county or state

***Must list all Personal Property owned in this county and/or another county or state

***If you may have a relative living with you, you must list their name, social security number, relationship to you, yearly gross income and provide proof of the relative's income.