



Cindy U. Wright
 Bland County Commissioner of Revenue
 P O Box 130
 Bland VA 24315

Tax Year 2009
Parcel #
Acct#
MH#
Ph. #

REAL ESTATE TAX EXEMPTION AFFIDAVIT

This form must be filled out and signed between February 1 and April 30.
Please read "Requirements for exemption of real estate taxes" to see if you qualify.

Name of person or persons holding title of the property for exemption is claimed:

_____ Date of birth _____
 _____ Date of birth _____

Address _____

Is this dwelling occupied by the applicant? Yes _____ No _____

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

Name of other persons occupying the same dwelling.

_____	Relation _____	Age _____	SS# _____
_____	Relation _____	Age _____	SS# _____
_____	Relation _____	Age _____	SS# _____
_____	Relation _____	Age _____	SS# _____

Location _____

	<u>Owner</u>	<u>Spouse</u>	<u>Relatives in dwelling</u>
Social Security	_____	_____	_____
SSI	_____	_____	_____
Annuities & Pensions	_____	_____	_____
Interest & Dividends	_____	_____	_____
Salaries-Wages-Commissions	_____	_____	_____
Public Assistance-Fuel Assistance, Food Stamps	_____	_____	_____
Rent-Royalties	_____	_____	_____
Other (Gifts, Capital Gains, Etc)	_____	_____	_____
<i>LESS</i>	<i>-0-</i>	<i>-0-</i>	<i>\$5000.00</i>

GRAND TOTAL

NOTE: If you filed a Federal Income Tax return last year, please attach a copy.

	<u>Owner</u>	<u>Spouse</u>	<u>Relatives in dwelling</u>
Cash on hand	_____		
Checking account balance	_____		
Savings account balance	_____		
CD's	_____		
Cash Value Annuities & Life Insurance	_____		
Stocks & Bonds	_____		
Real Estate	_____		
Personal Property	_____		
<i>TOTAL</i>	_____		
Less mortgage & other liabilities	_____		
Less value of dwelling & 1 acre	_____		
<i>COMBINED NETWORTH</i>	_____		

AMOUNT OF EXEMPTION & BALANCE:

Total taxes on real estate
 Total taxes on dwelling & 1 acre

AMOUNT OF EXEMPTION NOT TO EXCEED \$200.00

Balance of real estate taxes

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

Any person or persons falsely claiming an exemption shall be guilty of a misdemeanor and, upon conviction thereof, shall be fined not exceeding \$250.00.

Signature *Date*

Signature *Date*

Notary Public, Commissioner of Revenue, or Deputy

IF YOU HAVE QUESTIONS REGARDING THIS FORM, CALL 276-688-4291.