

APPOINTMENT OF REPRESENTATIVE

(Not required, complete only if you wish to appoint a representative)

I hereby appoint _____ whose telephone number is _____ and mailing address is _____ to represent me during the tax relief application process. The duration of this appointment will be valid for one year from the date the application is notarized. I hereby give consent to employees of the Office of the Commissioner of the Revenue to discuss this application with my representative and I agree to provide the necessary information should my appointed representative fail to do so.

AFFIDAVIT

Comes now _____, of legal age, having first sworn and on my/our oath state the foregoing statements are true and accurate to the best of my/our knowledge and belief, and I/we understand that any factors occurring during the taxable year for which an affidavit is filed that have the effect of exceeding or violating the limitations and conditions provided by the ordinance adopted by the County of Loudoun, shall nullify and void any real property or personal property tax relief for the current taxable year and I/we shall be disqualified from re-applying for an exemption for a period of two years.

I/We have read the foregoing affidavit and certify that its contents are true to the best of my/our knowledge and belief with the understanding that filing a fraudulent return is a Class 1 Misdemeanor.

In addition to any other penalties provided by law, any person who intentionally makes a false claim for an exemption shall not be entitled to the exemption from taxation, if granted, but shall be liable for the full amount of tax due. Furthermore, such persons shall be disqualified from re-applying for an exemption for a period of two years.

Applicant/Spouse/Co-owner(s) Name(s)

Applicant's Signature _____ Spouse's Signature _____

Co-Owner's Signature _____ Co-Owner's Signature _____

STATE OF VIRGINIA; COUNTY OF LOUDOUN; to Wit;

I hereby certify that _____ personally appeared before me in my County and State aforesaid who being first duly sworn by me acknowledged the signature to the foregoing affidavit to be his/her own and affirmed the said statements are true and correct. Subscribed and sworn before me, the undersigned Notary Public in the County and State aforesaid the _____ day of _____, 2019.

Notary Public _____ My Commission Expires _____

Notary Seal

FOR OFFICE USE ONLY				
Date Received:	Land Information	Income	Worth	Percentage Granted:
Method: APT <input type="checkbox"/> CNT <input type="checkbox"/> MAL <input type="checkbox"/> FAX <input type="checkbox"/> OTH <input type="checkbox"/>	Land Val:			P Prop 1: Q <input type="checkbox"/> N <input type="checkbox"/> Reas:
	1 st A Val:			P Prop 2: Q <input type="checkbox"/> N <input type="checkbox"/> Reas:
Location: LBG <input type="checkbox"/> STL <input type="checkbox"/> OTH <input type="checkbox"/>	3 rd A Val:			P Prop 3: Q <input type="checkbox"/> N <input type="checkbox"/> Reas:
Applicant: New <input type="checkbox"/> Renewal <input type="checkbox"/>	10 th A Val:			Real Property Relief: Q <input type="checkbox"/> N <input type="checkbox"/> Reas:
Div Dec: <input type="checkbox"/> Death Cert: <input type="checkbox"/>	Impr. Val:			Manuf. Acct: Q <input type="checkbox"/> N <input type="checkbox"/> Reas:
Trust: <input type="checkbox"/> Disability <input type="checkbox"/>	Land Use:	Percentage of Relief Granted:		
POA: <input type="checkbox"/> Other: <input type="checkbox"/>	Reviewed By:	Notes:		

2019 LOUDOUN COUNTY TAX RELIEF APPLICATION

For Vehicle Personal Property and/or Real Property

Robert S. Wertz, Jr., Commissioner of the Revenue

GOVERNMENT CENTER
1 Harrison St. SE 1ST Floor
Leesburg, VA 20175-3102

P O Box 8000, MSC 32, Leesburg, VA 20177-9804
(703) 737-8557

Email: trcor@loudoun.gov

LOUDOUN TECH CENTER
21641 Ridgetop Cir. Ste 100
Sterling, VA 20166-6597

FILING DEADLINES

All Previous Applicants
April 1, 2019

First-time Applicants for
Personal Property Tax Relief
September 3, 2019

First-time Applicants for
Real Property Tax Relief
December 31, 2019

MINIMUM AGE OR DISABILITY REQUIREMENT

On December 31, 2018, I was Age 65 or over and/or Permanently and Totally Disabled

If neither, you are ineligible for tax relief and should not complete this application.

MARITAL STATUS

On December 31, 2018, I was Single Married Separated Divorced Widowed

If divorced, provide a copy of the Divorce Decree and Settlement Agreement if receiving Alimony or Child Support.

COMPLETE FOR ALL PERSONS RESIDING IN THE DWELLING

Include Applicant, Spouse, Co-Owner(s), and all Relative(s) residing in the dwelling.

Name	Relationship to Applicant	Social Security Number	Birth Date	Percentage of Real Estate Ownership
<i>Last Name, First Name, Full Middle Name, Suffix</i>			<i>mm/dd/year</i>	
	APPLICANT			
	SPOUSE			
Applicant Address				
	<i>Street Address Only (No P.O. Box)</i>		<i>City / Town</i>	<i>State</i> <i>Zip Code</i>
Mailing Address				
	<i>Street Address or P.O. Box</i>		<i>City / Town</i>	<i>State</i> <i>Zip Code</i>
Contact Person			Phone Number (_____) _____ - _____	

COMPLETE FOR ALL REAL PROPERTY TAX RELIEF

List the names of all real property owners **NOT** residing in the dwelling. *Disability is defined under General Information.*

Name	Relationship to Applicant	Social Security Number	Birth Date	If Totally Disabled
<i>Last Name, First Name, Full Middle Name, Suffix</i>			<i>mm/dd/year</i>	<i>(Check here)</i>
				<input type="checkbox"/>
				<input type="checkbox"/>

Is this the sole residence **and** occupied by the applicant? Yes No
If No, please provide the health care facility name and address:

Is the property titled in the name of a Trust? Yes No If Yes, please provide a copy of the entire Trust and amendments, if not previously supplied, and a Schedule of Trust Assets as of December 31, 2018.

COMPLETE FOR PERSONAL PROPERTY TAX RELIEF

Please list the vehicle(s) to receive Personal Property Tax Relief. One vehicle per qualified applicant.

Applicant	Vehicle Information			Owner Name(s) on Vehicle Title
	Year	Make	Model	
<i>SELF</i>				<input type="checkbox"/> Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Other Owner(s):
				<input type="checkbox"/> Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Other Owner(s):

GROSS COMBINED INCOME

Complete the Gross Combined Income Statement with all income received during calendar year 2018. **Gross combined income for personal property tax relief** includes all income from all sources of the vehicle owner(s) and spouse. **Gross combined income for real property relief** includes all income from all sources of the owner(s), and of the owner's relatives living in the dwelling. Attach copies of all documentation, including all pages of the **2018 U.S. Federal Income Tax Return**. Use additional pages as needed.

If you were not required to file a Federal Income Tax Return for 2018, please initial here _____.

Gross Income <i>(Use Actual Amounts from Calendar Year 2018)</i>	Documentation Required	Applicant Income	Spouse Income	Co-owner(s) Income	Relative(s) Income
Salaries / Wages / Tips	W-2, 1099				
Social Security Benefits	1099-SSA				
Railroad Retirement Benefits	1099-RRB				
Veterans Benefits	Current Year Benefit Letter				
Pensions & Annuities	1099-R				
IRA Distributions	1099-R				
Interest Income	1099-INT/OID				
Dividend Income	1099-DIV				
Interest Income from Accts/Notes Receivable	Schedule B				
Business Income	Federal Returns and Schedules				
Capital Gains	Schedule D				
Trust Income	Schedule E				
Rents Received	Schedule E				
Alimony / Child Support Received	Form 1040				
Welfare & SSI	COLA Notice				
Monetary Gifts & Other Income Received	(Specify)				
Gross Income By Column					

FOR OFFICE USE ONLY					
*****REAL PROPERTY*****					TOTALS
Gross Income by Column					
Less Disability Exclusion					
Less Spouse and Relative Income Exclusion					
Gross Income by Column					
*****PERSONAL PROPERTY*****					TOTALS
Gross Income by Column					
Less Disability Exclusion					
Gross Income by Column					
Gross Combined Income of real property owner(s) and relatives(s) shall not exceed \$72,000 for real property tax relief. Add Gross Income by Column for Gross Combined Income				Gross Combined Income	RE
Gross Combined Income of vehicle owner(s) and spouse shall not exceed \$52,000 for personal property tax relief.				Gross Combined Income	PP

ASSETS

Report all assets including real and personal property, owned by you, your spouse, and all other owners on the title of the home as of December 31, 2018. Attach copies of all documentation. Use additional pages as needed.

Assets <i>(Use Actual Amounts as of 12/31/2018)</i>	Documentation Required	Bank / Financial Institution Name	Account Number(s)	Applicant's Assets in \$	Spouse's Assets in \$	Other Owner(s) Assets in \$
Checking and Money Market Account	Bank Statements as of 12/31/2018					
Savings Account						
Certificates of Deposit						
IRA(s) and 401K(s)	Account Statements as of 12/31/2018					
Brokerage, Annuity, or Mutual Fund Account						
Stocks or Savings Bonds (Attach List)						
Cash Value of Life Insurance						
Vested Interest in Retirement Fund						
Equity / Net Worth of Business Owned	Balance Sheet					
Balance on Notes & Mortgages Receivable	Copy of Note					
Trusts	Copy of Trust					
Automobiles, Boats, Trailers, Campers	Copy of Registration					
Real Property <i>(Other than Loudoun Residence)</i>	1/1/2019 Assessment					
Other Miscellaneous Assets (Specify)						
Total Assets By Column				(A)	(B)	(C)
				(Add Box A, B, and C) TOTAL ASSETS		

LIABILITIES				
Liabilities <i>(Use Actual Amounts as of 12/31/2018)</i>	Documentation Required	Creditor's Name	Account Number	Account Balance
Mortgages	Account Statement			
Installment Loans	Account Statement			
Other Miscellaneous Debts (Specify)				
Other Miscellaneous Debts (Specify)				
TOTAL LIABILITIES				

FOR OFFICE USE ONLY		PP1	PP2	RE
<i>Add all above asset columns that apply to each type of relief requested</i>				
Total Land Value :	Additional Value of Lots or Structures in Loudoun			
PP - 1st Acre Val:	(Total Land - 1st Acre) More than One Acre Value			
RE - 10 Acre Val:	(Total Land - 10 Acre) More than Ten Acre Value			
NET WORTH <i>(Total Assets Minus Total Liabilities)</i>		TOTAL ASSETS		
		TOTAL LIABILITIES		
		NET WORTH		