



**REAL ESTATE TAX EXEMPTION  
APPLICATION**

Tax Year  
**2022**

**Ann H. Thomas  
Commissioner of the Revenue  
P.O. Box 190  
Yorktown, Va. 23690-0190**

**Need Assistance?  
(757) 890-3382**

**Application may be mailed or submitted through the document portal**

**EXEMPTION FOR SURVIVING SPOUSE OF CERTAIN PERSONS KILLED IN THE LINE OF DUTY  
Code of Virginia § 58.1-3219.13**

**DOCUMENTS ON FILE** Yes   
**DOCUMENTS ATTACHED** Yes

**GPIN #:**

LEGAL OWNER NAME(S): \_\_\_\_\_

NAME OF SURVIVING SPOUSE: \_\_\_\_\_

NAME OF DECEASED SPOUSE: \_\_\_\_\_

PRINCIPAL RESIDENCE ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

IS THIS PROPERTY OCCUPIED AS THE PRINCIPAL RESIDENCE OF THE SURVIVING SPOUSE?  
Yes  No

HAS THE SURVIVING SPOUSE REMARRIED Yes  No

**PLEASE PROVIDE THE FOLLOWING:**

- Evidence of the determination by the Comptroller or by the Virginia Retirement System identifying you as the covered person's beneficiary and entitlement to receive benefits.
- Documentation that you are the surviving spouse of the covered person and the date that the person died.

**Supporting documentation is being submitted via:  Mail  Document Portal**

**As surviving spouse of a person killed in the line of duty, you must notify the Commissioner of the Revenue if this real estate is no longer your principal place of residence or if you remarry.**

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

***(If submitting by Document Portal, this application must be initialed, which will be the equivalent of your signature)***

Owner's Initials: \_\_\_\_\_ Owner's Email: \_\_\_\_\_

***(If submitting by MAIL, this form must be signed)***

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(It is recommended that you PRINT and/or SAVE a copy for your records)**

To submit this form through the document portal, please save your completed form and upload it [here](#).

**OFFICE USE ONLY**

Owner of Record:	Account Number:
Qualifies? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain why:	Qualifies as: <input type="checkbox"/> Surviving Spouse of Covered Person killed in the Line of Duty

Land Value	
Building Value	
Total Value:	
Tax Rate:	
Total Taxes	
<b>*Amount of Exemption</b>	

\*Amount of exemption may only include a portion of the building value based on the County average assessed value per Code of VA.