



# COUNTY OF PRINCE WILLIAM

Real Estate Assessments Office (703) 792-6780  
 4379 Ridgewood Center Drive, #203, Prince William, VA 22192

[www.pwcva.gov/department/finance/disabled-veterans](http://www.pwcva.gov/department/finance/disabled-veterans) | email: [realestate@pwcgov.org](mailto:realestate@pwcgov.org) | fax (703) 792-4025

# 2024

### Applicant:

Name:  
 Mailing address:  
 City, State, Zip:  
 SSN:  
 Phone number:  
 eMail Address:

### Co-Owner:

Name:  
 Relationship:  
 SSN:

**!** Qualifying applicants must recertify annually.

**Real Estate Tax Relief** may be granted on a home you own and occupy, and up to one acre of land it occupies.

I certify this home has been occupied as, and is currently, my principal place of residence since



Applicant's signature

Date

Do you own another home? Yes No If "Yes", please provide its full address:

I certify I do not receive real estate tax relief on any other property



Applicant's signature

Date

**Personal Property Tax Relief** may be granted on one automobile or pickup truck owned by a qualifying veteran or their spouse and used primarily by or for the qualifying veteran.

Make and Model

Title Number

I certify this vehicle is used primarily by or for me



Applicant's Signature

Date



**FIRST-TIME APPLICANTS MUST COME TO OUR OFFICE AND SHOW A GOVERNMENT-ISSUED PICTURE ID**



**PLEASE SUBMIT THE FOLLOWING DOCUMENTATION:**

**1. DOCUMENTATION FROM THE U.S. DEPARTMENT OF VETERAN AFFAIRS (VA) STATING THE FOLLOWING:**

- i. Your disability is service-connected, 100% (or compensated at the 100% rate), permanent, and total.
- ii. The date the VA determined your disability was service-connected, 100% (or compensated at the 100% rate), permanent, and total.

THIS INFORMATION CAN BE FOUND IN YOUR VA SUMMARY OF BENEFITS FROM [WWW.EBENEFITS.VA.GOV](http://WWW.EBENEFITS.VA.GOV)

**2. A COPY OF YOUR 2023 VIRGINIA STATE INCOME TAX RETURN**

**3. A COPY OF YOUR 2023 FEDERAL FORM 1040 INCLUDING ALL SCHEDULES**

*** OFFICE USE ONLY ***		
RPC #	DATE OF PURCHASE:	
LOT SIZE (Ac.):	NQA (\$):	
VA DISABILITY DATE:	DISABILITY EXEMPTION DATE:	
VA DOCUMENTATION REVIEWED BY:	% OWNED BY APPLICANT AND SPOUSE:	
ID CHECK <input type="checkbox"/> BY:	DATE:	VA Residency
RE APPROVED	PP APPROVED	DATE: BY: