



TAX RELIEF FOR THE ELDERLY or DISABLED FY21 REAL ESTATE/2020 PERSONAL PROPERTY

CITY OF MANASSAS
COMMISSIONER OF THE REVENUE
9027 CENTER ST STE 104
MANASSAS VA 20110

CONTACT: TERRI MARTIN (703) 257-8298

GENERAL REQUIREMENTS

To qualify, an applicant must:

- Be age 65 or older, OR permanently and totally disabled* on December 31, 2019
- Own and occupy the dwelling as his/her sole residence (If applying for Real Estate Relief)
- Meet Income/Net Worth Limits (see reverse for information)

See Reverse for NEW Income/Net Worth Limits and other information.

**THIS APPLICATION MUST BE FILLED OUT COMPLETELY AND RETURNED TO
THE COMMISSIONER OF THE REVENUE BY JULY 1, 2020.**

YOU MUST APPLY EACH YEAR FOR TAX RELIEF!

APPLICATIONS RECEIVED AFTER JULY 1, 2020 WILL NOT BE ACCEPTED OR CONSIDERED

CHECKLIST OF ITEMS TO BE SUBMITTED WITH APPLICATION

- 2019 Federal Income Tax Return (If required to file) including all schedules for each person in the household that filed
- *IF YOU ARE NOT REQUIRED TO FILE AN INCOME TAX RETURN*, SUBMIT All W-2's & 1099-INT, 1099-R, 1099-CSA, 1099-DIV, 1099-B, 1099-MISC etc. (Social Security, Civil Service, Pensions, IRA's, Annuities, Profit-Sharing, Insurance Contracts, and other income)
- All **December 2019 ONLY** Financial and Bank Account Statements (Checking, Savings, Pensions, etc.)
- Tax Assessment and mortgage statement for any OTHER real estate (excludes your primary residence)

*Certification by the Social Security Administration, the Veteran's Administration, the Railroad Retirement Board or affidavits by two medical doctors licensed to practice medicine in Virginia that you are permanently and totally disabled must be submitted. One of the affidavits must be based upon a physical examination. The application form must be signed in the presence of a notary. This service is available free of charge to applicants at City Hall. After you have completed the form and it has been notarized, return the application to:

**Terri Martin
Deputy Commissioner of the Revenue
9027 Center St Ste 104
Manassas VA 20110**

REAL ESTATE
Income Limits for FY2120

Gross Income	Exemption	Maximum Exemption
0.00 - 29,150 ->	100%	
29,151 - 56,150 ->	100%	\$ 3,400
56,151 - OVER ->	0	

PERSONAL PROPERTY
Income Limits for 2020:

Gross Income	Exemption
0 - 56,150 ->	100%
56,151 - OVER ->	0

In determining income, the first \$10,000 of income earned by any relative living in the household other than the owner(s) or spouse is excluded.

THIS APPLICATION APPLIES TO:

- **FY21 REAL ESTATE TAXES DUE DECEMBER 7, 2020 AND JUNE 7, 2021**
- **PERSONAL PROPERTY TAXES DUE OCTOBER 7, 2020. Tax Relief does not apply to license fees or parking fees (if applicable).**

Net Worth Limits

A combined financial net worth for the applicant and spouse residing in the home of **not more than \$340,000**, excluding the residence for which the exemption is sought and up to one acre of land which it occupies.

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FY21 REAL ESTATE/2020 PERSONAL PROPERTY**



DUE JULY 1, 2020

CITY OF MANASSAS
COMMISSIONER OF THE REVENUE
9027 CENTER ST STE 104
MANASSAS VA 20110

Contact: Terri Martin - (703) 257-8298

RELIEF APPLYING FOR:

REAL ESTATE TAX

PERSONAL PROPERTY TAX

YOU MUST REAPPLY EACH YEAR

APPLICANT: Please enter the following information:

Applicant/Owner:

_____	_____	_____
Last Name	First Name	Middle Name
_____		_____
Date of Birth		Social Security #

Spouse or Co-Owner

_____	_____	_____
Last Name	First Name	Middle Name
_____		_____
Date of Birth		Social Security #

Applicant's Address:

_____	_____	_____	_____
Number and Street	Apt #	City/State	Zip Code

Phone Number:

Email Address:

OFFICE USE

RE PID# _____
ASSESSMENT _____
INCOME _____
100% _____ \$3400 _____

PPID# _____
TITLE # _____
ASSESSMENT _____
YES _____ NO _____

Balance: Defer ____ Pay ____

DATE REC'D _____

Complete the following for all other relatives (by blood, adoption or marriage) who live in the home as of December 31, 2019

First Name	Middle Name	Last Name	Date of Birth	Social Security #	Relationship

If you are applying for REAL ESTATE TAX RELIEF, answer the following questions:

1. Is this residence occupied by the applicant as the sole dwelling?

Yes _____ No _____

2. Do you own any other real estate?

Yes _____ No _____

a. If yes, where is the property located and what is the estimated fair market value?

Address _____ FMV _____

b. Is the applicant sole or partial owner?

Sole Owner _____ Partial Owner _____

c. If partial owner, describe how the ownership is legally held and the applicant's interest.

3. If you qualify for a partial **REAL ESTATE EXEMPTION**, do you want to pay or defer the balance?

Pay _____ *Defer _____

*Deferral of taxes means that the portion of the taxes that is not relieved shall be allowed to remain unpaid without penalty, but must be paid within one year after the property is either sold or the qualified owner is deceased. Interest, however will accrue on the deferred portion of the taxes.

In the chart below, enter the **TOTAL 2019 GROSS INCOME** and assets owned as of December 31, 2019.

TOTAL FULL-YEAR GROSS INCOME	Applicant/Owner	Spouse	Other	TOTAL
Salary/Wages				
Social Security (1099-SSA, Box 5)/ RR Retirement				
Annuity Distributions				
Pension/IRA/Other Retirement				
Veterans Benefits/Veterans Disability				
Interest/Dividends/Capital Gains				
Business/Royalty/Rental Income				
Unemployment/Workman's Comp				
Other Income (Please List)				
Total				

ASSETS ON DEC 31, 2019	Applicant/Owner	Spouse	Other	TOTAL
Savings Accounts/Cert of Deposit				
Checking/Money Market Accts				
Stock, Bonds, etc.				
Retirement Accounts/IRA				
Life Insurance/Annuity – Cash Value				
Other Real Estate Owned				
Other assets (household)				
Total				
Liabilities*	-	-	-	-
Total Net Worth				

* Liabilities **do not include** the mortgage on the house on which you are seeking relief or credit card debt. Include mortgage on OTHER real estate and car loans.

List all Motor Vehicles, Trailers, etc. registered with DMV and Owned on January 1, 2020. IF MOTOR VEHICLE IS LEASED, LIST THE LEASE COMPANY NAME

Year	Make	Title Number	LEASE COMPANY

⌘ AFFIDAVIT and AUTHORIZATION TO VERIFY RELIEF STATUS ⌘

I _____ and _____
do swear or affirm that the statements and figures contained in this application are true, full and correct to the best of my knowledge and belief, and I understand that any factors occurring during the taxable year for which this affidavit is filed that will result in exceeding or violating the limitations and conditions provided by Section 110-82, of the City of Manassas Code, shall nullify any exemption and/or deferral for the current taxable year and the next taxable year.

I also authorize the City of Manassas to verify RELIEF STATUS ONLY to inquiries by mortgage, title and settlement companies. I understand income, asset or any other information considered confidential will not be disclosed.

APPLICANT'S SIGNATURE DATE

CO-OWNER'S SIGNATURE DATE

COMMONWEALTH OF VIRGINIA

CITY/COUNTY OF _____, TO WIT:

I hereby certify that _____ and _____
personally appeared before me in the City and State aforesaid, who being first duly sworn by me, acknowledge the signature to the foregoing affidavit to be his or her own and stated that on the information and belief the said statements are true and correct.

Subscribed and sworn to before me the undersigned Notary Public in my City and State aforesaid this _____ day of _____, 2020.

Notary Public
My Commission Expires _____
Registration Number _____