



**OFFICE OF THE COMMISSIONER OF THE REVENUE
CLARKE COUNTY**

P.O. Box 67 – Berryville, Virginia 22611
(540) 955-5108 FAX (540) 955-1629

FILING DEADLINE: MAY 1ST

**APPLICATION FOR REAL ESTATE TAX EXEMPTION FOR
ELDERLY AND DISABLED HOMEOWNERS**

Applicant (Property Owner) _____
Last Name First Middle

Address _____
Street City State Zip

Birth Date _____ Phone Number _____
Month Day Year

Spouse _____
Last Name First Middle

Birth Date _____ RE Map # _____
Month Day Year

Is this dwelling occupied by the applicant as the sole dwelling? Yes No

Is the applicant the Owner or Partial Owner?

List all other relatives living in the house, **except for the spouse**, who occupy the dwelling.

NAME	RELATIONSHIP	AGE

Note: For those applying under the “disabled” category must provide a physicians statement that they are permanently and totally disabled and unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or can be expected to last for the duration of such persons life. Code of Virginia 58.1-3217.

Please complete this gross income statement for previous calendar year. Included in the statement should be the total gross income from all sources of the applicant and spouse, and income of each relative living in the dwelling.

GROSS INCOME	APPLICANT	SPOUSE	RELATIVES
Salaries, wages			
Pensions			
Social Security			
Interest			
Dividends			
Rent(s)			
Welfare			
Gifts			
Capital Gains			
Trust Fund Income			
Other Sources			
TOTAL			

Please complete this statement of net financial worth as of December 31, of previous year. This does **not** include the fair market value of the dwelling and the land, not exceeding one acre, upon which the dwelling is situated.

NET VALUE OF ASSETS	APPLICANT	SPOUSE
Real Estate: Exclude applicants residence		
Automobiles: Yr ____ Make ____ Model ____		
Mobile Home: Yr ____ Make ____		
Money in Certificates & Savings		
Checking Accounts		
Stocks/Bonds		
Insurance (Cash Value)		
Property in Trust		
Other Assets		
TOTAL ASSETS		
LESS – TOTAL LIABILITIES		
TOTAL NEW FINANCIAL WORTH		

Date _____

Signature of Applicant _____

Qualifying Income Levels

0-\$20,000	100% Relief
\$20,001-\$25,000	80% Relief
\$25,001-\$30,000	60% Relief
\$30,001-\$35,000	50% Relief
\$35,001-\$55,000	10% Relief

Total Net Worth \$250,000

(Includes all assets except a house and one acre of land)

Exemption: For a relative who is not a spouse - \$8,000