



**Augusta County, Virginia**  
 George E. Price, Commissioner of the Revenue  
 P. O. Box 959, Verona, VA 24482  
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**2026 APPLICATION FOR REAL ESTATE TAX RELIEF**

**DUE BY APRIL 1, 2026**

Applicant Name:  
 Spouse Name:  
 Mailing Address:  
 Mailing City, State ZIP:

Record	
Tax Map	
Address	
City, State ZIP	

<b>1. PERSONAL INFO</b>	<b>Applicant</b>	<b>Spouse</b>
Social Security Number		
Date of Birth		
Phone Number		

**2. (OPTIONAL) PROVIDE INFORMATION OF A CONTACT WE MAY CALL ON YOUR BEHALF.**

_____	_____	_____
Name	Relationship	Phone Number

**3. LIST ANY PERSONAL PROPERTY AND REAL ESTATE (OTHER THAN THE PRIMARY RESIDENCE) OWNED BY THE APPLICANT OR SPOUSE.**

Personal Property (Vehicles, Trailers, etc.)	Real Estate (Include Locality and Address)

**4. LIST THE NAMES, RELATIONSHIPS, AND AGES OF ANY RESIDENTS LIVING IN THE DWELLING OTHER THAN THE APPLICANT OR SPOUSE.**

Name	Relationship	Age

5a. DOES THE APPLICANT LIVE IN THE DWELLING ALL YEAR?     YES     NO

5b. DOES THE SPOUSE LIVE IN THE DWELLING ALL YEAR?     YES     NO     N/A

5c. IF EITHER QUESTION 5a OR 5b IS NO, EXPLAIN: \_\_\_\_\_  
 \_\_\_\_\_

**6. COMPLETE THE INCOME TABLE USING THE 2025 GROSS (PRE-TAX) INCOME FOR THE APPLICANT, SPOUSE, AND ANY OTHER RESIDENTS LIVING IN THE DWELLING.**

<b>Gross Income</b>	<b>Applicant</b>	<b>Spouse</b>	<b>Other Residents</b>
Social Security			
Pensions/Annuities			
Retirement Withdraws			
Salary, Wages, etc.			
Investment Income			
Other:			
Other:			

**7. COMPLETE THE NET WORTH TABLES USING ASSET AND LIABILITY BALANCES AS OF DECEMBER 31, 2025 FOR THE APPLICANT AND SPOUSE.**

<b>Assets</b>	<b>Applicant</b>	<b>Spouse</b>
Checking Accounts		
Savings Accounts		
Certificates of Deposit		
Brokerage Accounts		
Retirement Accounts		
Other:		
Other:		

<b>Liabilities</b>	<b>Applicant</b>	<b>Spouse</b>
Mortgages		
Car Loans		
Credit Card Debt		
Other:		
Other:		

<b>OFFICE USE ONLY</b>	
Income Adjustments	
<b>Gross Income</b>	
Personal Property	
Real Estate	
Asset Adjustments	
<b>Total Assets</b>	
Liability Adjustments	
<b>Total Liabilities</b>	
<b>Net Worth</b>	
Percent Relief	
Qualifying Value	
Record Number	

**DUE BY APRIL 1, 2026**

**I CERTIFY UNDER THE PENALTIES PROVIDED BY LAW THAT THIS APPLICATION FOR REAL ESTATE TAX RELIEF, INCLUDING ANY ACCOMPANYING SCHEDULES OR STATEMENTS, TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT, AND COMPLETE.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse Signature

\_\_\_\_\_  
Date