

**APPLICATION FOR EXEMPTION FOR CERTAIN  
REHABILITATED RESIDENTIAL AND COMMERCIAL  
REAL ESTATE**

FORM RE



T. Scott Harris  
Commissioner

\* 1 2 3 4 5 6 \*

**APPLICANT & PROPERTY INFORMATION**

|                            |                         |   |
|----------------------------|-------------------------|---|
| <b>OWNER'S NAME:</b>       | <b>GPIN</b>             | <b>PROPERTY TYPE</b><br><i>(RESIDENTIAL/COMMERCIAL)</i> |
| <b>MAILING ADDRESS:</b>    | <b>PROPERTY ADDRESS</b> |   |
| <b>CITY / STATE / ZIP:</b> | <b>YEAR BUILT</b>       | <b>BUILDING PERMIT #</b>                                |

**PROJECT DESCRIPTION**

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**VALUATION**

|   |    |
|---|----|
| Market value of building (base) on January 1 of the year in which the building permit is acquired | \$ |
| Estimated increase in value   | \$ |
| Total expected value after rehabilitation   | \$ |

**SQUARE FOOTAGE**

|   |
|---|
| Square footage of the living area at the time the building permit is acquired |
| Estimated increase in square footage of living area                           |
| Total expected square footage of the living area after rehabilitation         |

I certify that the information contained in this application is true and correct to the best of my knowledge and that the property will be in compliance with all federal, state and county code provisions during the rehabilitation.

Signature

Date

**Please complete the above information, attach a copy of the building permit and sketch of work to be done and return the application along with the required application fee (\$125 for residential, \$250 for commercial or industrial) to:**

**Commissioner of the Revenue  
PO Box 129  
Hanover, VA 23069  
ATTN: Rehab Real Estate Program**

Please contact the office at 804-365-6128 with any questions or requests for further information. Additional copies of the application are available online at [www.co.hanover.va.us](http://www.co.hanover.va.us).