



Philip J. Kellam
Commissioner

Commissioner of the Revenue

City Hall
Virginia Beach, VA 23456-9002



VBgov.com/cor

DECLARATION FOR LOCAL VEHICLE REGISTRATION FEE EXEMPTION

Please check the division that applies:

- VOLUNTEER FIRE FIGHTER AND RESCUE SQUAD AUXILIARY POLICE
 AUXILIARY DEPUTY SHERIFF VOLUNTEER POLICE CHAPLAINS

Complete and return to Chief of Fire Company, or Rescue Squad, or Chief of Police, or Sheriff for exemption of vehicle from the Local Vehicle Registration Fee. This declaration will be valid until an amended declaration is filed. An amended declaration may be filed for any vehicle exemption change or for any change to inactive status, or you may contact the Personal Property Taxpayers Division of this office via telephone at 757.385.4487; via facsimile at 757.427.1802; or via electronic mail at persprop@vb.gov.

Original Declaration

Amended Declaration

Name _____

Owner's Social Security Number _____

Address _____

Virginia Beach, VA (Zip) _____

Phone Number _____

Email Address _____

Resident of Virginia Beach? Yes

Resident of Another Locality? Yes If yes, please indicate locality: _____

Non-Resident Military Personnel Please Send Copy of Leave and Earnings Statement "LES".

VEHICLE DESCRIPTION

Make _____

Model _____

Title Number _____

License Plate Number _____

VIN Number _____

If vehicle is leased, please indicate lease company: _____

PLEASE CHECK ONE:

In order to qualify for the exemption, I hereby agree to notify the Commissioner of the Revenue, immediately upon my becoming an inactive volunteer prior to completing 10 or more years of service, in accord with the city ordinance.

I no longer qualify for an exemption, therefore I hereby notify the Commissioner of the Revenue of becoming an inactive volunteer prior to completing 10 or more years of service, in accord with city ordinance.

Signature of Applicant _____ Date _____

I hereby certify that the above named applicant is an active volunteer of the _____ or is an inactive volunteer with 10 or more years of service. In accord with city ordinance, I hereby agree to notify the Commissioner of the Revenue, immediately of any volunteer who becomes inactive and the length of active volunteer service.

Signature of Chief _____ Date _____

For hearing or visually impaired assistance dial 711