



# County of Northampton

PO BOX 65  
EASTVILLE, VIRGINIA 23347  
OFFICE OF THE COMMISSIONER OF REVENUE

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REAL ESTATE & MAPPING  
INCOME TAX & PERSONAL PROPERTY  
(757) 678-0446

## MILITARY EXEMPTION FORM

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### SERVICE MEMBER'S INFORMATION

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
Social Security Number \_\_\_\_\_ State of Legal Residence \_\_\_\_\_

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### LEGAL RESIDENCE ADDRESS

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Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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### NON-MILITARY SPOUSE INFORMATION

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Are you employed?  Yes  No

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### LOCAL RESIDENTIAL ADDRESS

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Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

I do hereby certify that all the information listed above is true and correct to the best of my knowledge. I have also enclosed my Leave and Earnings Statement (LES) with this application.

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Military Service Member's Signature

Date

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Telephone

E-Mail Address

I am requesting that my tangible personal property be exempt from taxation in Virginia as provided by the Military Spouses Residency Relief Act. I am temporarily present in the state of Virginia solely to be with my spouse, with whom I reside at the above Virginia address. I do hereby certify that all the information provided above is true and correct to the best of my knowledge.

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Non-Military's Spouse Signature

Date