

DISABLED VETERAN STATUS

MERRYMOUNT ANNUAL MEETING JUNE 6, 2026

PROOF OF DISABILITY FOR MECKLENBURG COUNTY

Step 1

- Must be owned and occupied as primary residence
- **Veteran status:** Must be a U.S. Armed Forces veteran or a Virginia National Guard member
- **Disability rating:** Must be rated 100% service-connected, permanent, and total by the VA or successor agency
- Must be honorable discharged
- Then send to the board the proof of disability

Mecklenburg County, Virginia
Real Estate Assessor's Office
P. O. Box 360
Boydton, Virginia 23917

Verification of Exemption for Disabled Veterans

Under Code of Virginia 58.1-3219.5 to receive Exemption for Disabled Veterans, Veterans or their surviving spouse must file this form with the Commissioner of the Revenue. The veteran shall provide documentation from the U.S. Department of Veterans Affairs or its successor agency indicating that the veteran has a service-connected, permanent and total disability and being paid at the 100% rate due to unemployability. You must also provide a copy of your Drivers License/Photo ID and Utility Bill to prove that the property is utilized as the principal residence for the qualifying veteran or qualifying spouse.

Note: The surviving spouse of a veteran is eligible for the exemption if the death of the veteran occurs on or after January 1, 2011, the surviving spouse does not remarry, and the surviving spouse continues to occupy the real property as his/her principal place of residence.


Veteran Name:	
Spouse/Surviving Spouse Name:	
Mailing Address:	
Property owned jointly? (Yes/No)	Principle residence? (Yes/No)
Telephone Number:	Email Address:

I/We declare, under penalties provided by law, that this affidavit has been examined by me/us and to the best of my/our knowledge and belief is true, correct, and complete.

Signature of Veteran

Date

SAMPLE LETTER


DEPARTMENT OF VETERANS AFFAIRS
810 Vermont Ave NW
Washington, D.C. 20420

February 17, 2021

Your Name: _____
Address: _____
City, State, Zip: _____

In Reply Refer to:
xxx-xx-0000
27aBenefits

Dear Mr./Ms. Full Name: _____

This letter is a summary of benefits you currently receive from the Department of Veterans Affairs (VA). We are providing this letter to disabled Veterans to use in applying for benefits such as state or local property or vehicle tax relief, civil service preference, to obtain housing entitlements, free or reduced state park annual memberships, or any other program or entitlement in which verification of VA benefits is required. Please safeguard this important document. This letter is considered an official record of your VA entitlement.

Our records contain the following information:

Personal Claim Information
Your VA claim number is: xxx-xx-0000
You are the Veteran.

Military Information
Your most recent, verified periods of service (up to three) include:

Branch of Service	Character of Service Honorable	Entered Active Duty MONTH/DAY/YEAR	Released/Discharged MONTH/DAY/YEAR

(There may be additional periods of service not listed above.)

VA Benefit Information


You have one or more service-connected disabilities: Yes
Your combined service-connected disability: 100%
Your current monthly award amount is: \$xxx
The effective date of the last change to your current award was: MONTH DAY, YEAR
You are considered to be totally and permanently disabled due solely to your service-connected disabilities: Yes
The effective date of when you became totally and permanently disabled due to your service-connected disabilities: MONTH DAY, YEAR
You are in receipt of special monthly compensation due to the type and severity of your service-connected disabilities: Yes

You should contact your state or local office of Veterans' affairs for information on any tax, license, or fee-related benefits for which you may be eligible. State offices of Veterans' affairs are available at <http://www.va.gov/info/eha/eha.htm>.

How You Can Contact Us

- If you need general information about benefits and eligibility, please visit us at <https://www.ebenefits.va.gov> or <http://www.va.gov>.
- Call us at 1-800-827-1000; if you use a Telecommunications Device for the Deaf (TDD), the number is 1-800-827-4833.
- Ask a question on the Internet at <https://its.outreach.va.gov>.

Sincerely,



Cheryl J. Riehl
Assistant Deputy Under Secretary for Field Operations
Office of Outreach and Stakeholder Engagement

APPROVAL LETTER FROM MECKLENBURG COUNTY

Step 2

[Home](#) > [Government](#) > [County Departments A - L](#) > [Commissioner of Revenue](#) > [Disabled Veterans Exemption](#)

Disabled Veterans Exemption

If you are a 100% service connected disabled veteran you may qualify for an exemption of one vehicle on your personal property taxes.

[Personal Property Disabled Veteran Exemption Application](#)

If you are a 100% service connected disabled veteran or a surviving spouse you may qualify for an exemption on your real estate taxes on your primary residence.

[Real Estate Disabled Veteran Exemption Application](#)

[Sample of Required Disabled Veteran Letter](#)

You can mail, email or fax the forms.

Mail: PO Box 360 Boydton, VA 23917

Email: teresa.robinson@mecklenburgva.com

Please contact our office for more details.



Mecklenburg County, Virginia

Commissioner of the Revenue

Post Office Box 360

Boydton, Virginia 23917

meckcor@mecklenburgva.com

Telephone: (434) 738-6191 ext. 4270 or 4279

Lisa C. Wagstaff
Commissioner

April 16, 2026

Pursuant to Code of Virginia 58.1-3219.5, Mecklenburg County has approved your application for tax exemption. The exemption will be effective XX/XX/XXXX.

Per State Code the exemption is for one acre of land, primary residence and any other buildings that may hold household items.

If you have any questions, you may contact our office at 434-738-6191 ext. 4270.

Sincerely,

Teresa A. Robinson
Deputy Clerk

REVENUE MAY NOT BE REPRODUCED

SUBMIT DOCUMENTATION TO MERRYMOUNT SECRETARY

Step 3



Lisa C. Wagstaff
Commissioner

Mecklenburg County, Virginia
Commissioner of the Revenue
Post Office Box 360
Boydton, Virginia 23917
meckcor@mecklenburgva.com
Telephone: (434) 738-6191 ext. 4270 or 4279

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Teresa A. Robinson
Deputy Clerk

SAMPLE LETTER

 DEPARTMENT OF VETERANS AFFAIRS
810 Vermont Ave NW
Washington, D.C. 20420

February 17, 2021

Your Name _____ In Reply Refer to: xxx-xx-0000
Address _____ 2746benefits
City, State, Zip _____

Dear Mr./Ms. Full Name :

This letter is a summary of benefits you currently receive from the Department of Veterans Affairs (VA). We are providing this letter to disabled Veterans to use in applying for benefits such as state or local property or vehicle tax relief, civil service preference, to obtain housing entitlements, fee or reduced state park annual memberships, or any other program or entitlement in which verification of VA benefits is required. Please safeguard this important document. This letter is considered an official record of your VA entitlement.

Our records contain the following information:

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Military Information

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VA Benefit Information

You have one or more service-connected disabilities: Yes

Your combined service-connected evaluation is: 100%

Your current monthly award amount is: \$xxx

The effective date of the last change to your current award was: MONTH DAY, YEAR

You are considered to be totally and permanently disabled due solely to your service-connected disabilities: Yes

The effective date of when you became totally and permanently disabled due to your service-connected disabilities: MONTH DAY, YEAR


You are in receipt of special monthly compensation due to the type and severity of your service-connected disabilities: Yes

You should contact your state or local office of Veterans' affairs for information on any tax, license, or fee-related benefits for which you may be eligible. State offices of Veterans' affairs are available at <http://www.va.gov/info/edu>.

How You Can Contact Us

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- Ask a question on the Internet at <https://vsa.outhehelp.us.gov>.

Sincerely,



Cheryl J. Rows
Assistant Deputy Under Secretary for Field Operations
Office of Outreach and Stakeholder Engagement