

Jenefer S. Hughes,
MBA, ACA
Commissioner

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Chief Deputy Commissioner

COMMISSIONER OF THE REVENUE

Chesterfield County

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Vehicle Condition Certification Form

This form should be completed only if a visual inspection has been performed on the vehicle described below in a prior tax year.

I, _____, do declare as owner, or agent for the owner, of the motor vehicle listed below:

- I have no plans in the future to repair and/or restore this motor vehicle.
- I declare that this motor vehicle is in the same general condition as when it was inspected by a Tax Assessment Employee on _____.
- I declare that I am retaining this motor vehicle for parts only, and I have been advised that I may request DMV to declare this motor vehicle a non-repairable vehicle.

Year: _____ Make & Model: _____

VIN#: _____

I understand I must request and submit a completed copy of this form for each tax year that I desire to request a reduction in the assessed value of the referenced motor vehicle due to its physical condition as of January 1st of the applicable tax year. I further understand that it is my responsibility to notify the Office of the Commissioner of the Revenue if the physical condition of this motor vehicle is enhanced due to repair, restoration, etc.

This affidavit can be notarized in the Commissioner of the Revenue's Office at no cost.

_____ Please print name	_____ Signature
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County of Chesterfield, Commonwealth of Virginia.

The foregoing instrument was acknowledged before me on this _____ day of _____ 20____

By, _____

Notary Public _____ # _____

My commission expires on: _____