



# CITY OF HARRISONBURG REAL ESTATE

REAL ESTATE ASSESSMENT OFFICE  
409 SOUTH MAIN STREET, HARRISONBURG, VA 22801  
OFFICE (540) 432-7795 • FAX NUMBER: (540) 432-8938

## CITY OF HARRISONBURG

### APPLICATION FOR PARTIAL EXEMPTION FROM TAXATION FOR REHABILITATED, RENOVATED OR REPLACED REAL ESTATE

Instructions: One application must be completed for each tax parcel. A \$50.00 fee is required for each application. The processing of this application is subject to City Code Section 4-2-28 and certain administrative requirements. Copies of the City Code and administrative requirements are available in the Real Estate office. It is incumbent on the applicant to familiarize and adhere to these requirements.

Type of Property: Residential \_\_\_\_\_ Commercial \_\_\_\_\_

Age of improvements on property: Years \_\_\_\_\_

Owner: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Property address: \_\_\_\_\_

Tax Map number: \_\_\_\_\_

Estimated cost of Rehabilitation: \$ \_\_\_\_\_

Description of work being done: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

#### FOR OFFICE USE ONLY

Date application received: \_\_\_\_\_ Fee paid: \_\_\_\_\_ Receipt number: \_\_\_\_\_

Date of initial inspection: \_\_\_\_\_ Base Value: \_\_\_\_\_ Application Number: \_\_\_\_\_

Date of issuance of Building Permit: \_\_\_\_\_ Permit number: \_\_\_\_\_ Sq Footage of **original** structure: \_\_\_\_\_

Sq Footage **replacement** structure: \_\_\_\_\_ Date of Final Inspection: \_\_\_\_\_ Final Value AFTER Rehabilitation: \_\_\_\_\_