

All account information shown are accounts created by staff. No existing citizen information is used

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Creating a Citizen Account

- Main login page of the portal is where you can either login with your existing account if you have already signed up or you may create a new account. To create a new account, use the following steps:
- Click on “Enroll Here” on the main portal page (highlighted in red below)

Chesterfield
County Virginia

Citizen Portal

Account Information

Use your online account to:

- View current Personal Property Accounts
- Submit Tax Relief and Personal Property Forms
- File and pay - Business License Renewals / New Bus. Applications
- File - Business Tangible Personal Property / Computer Equip/ M&T
- File Specialty Taxes - Transient Occupancy, Short Term Rental, or Consumer and Consumption
- View and pay Personal Property and Real Estate Taxes
- For questions about your business license or other tax filings, please call the Commissioner of the Revenue's Office at 804-748-1281 or email cor@chesterfield.gov for assistance.
- For questions about your invoice or payment, please call the Treasurer's Office at 804-748-1201 or email treasurer@chesterfield.gov for assistance.

Commissioner of the Revenue Citizen Portal Manual (PDF)

User Name

Password

Log On **Enroll Here**

- **Forgot Password**
- **Forgot Username**

Commissioner of the Revenue | Treasurer's Office | Accessibility | Privacy Policy | Site Map

Chesterfield County
9901 Lori Road
Chesterfield, VA 23832

- Once “Enroll Here” is clicked on you will be sent to the following page, where you will need to complete user information to create a new account. Once completed, click “Register” at the bottom.

Create New User Account

Use the form below to create a new account.

Full Name

User Name

Phone Number

Email Address

Confirm Email Address

Password

Confirm Password

What would be your main use of the Citizen Portal?
Please choose one:

- Commissioner of the Revenue:** Personal Property (Submit Vehicle or Boat forms, review Personal Property info, and submit Military documents)
- Commissioner of the Revenue:** Tax Relief (Apply for Veteran's Real Estate, Vehicle exemptions, and Elderly and Disabled Tax Relief)
- Commissioner of the Revenue:** Business Filing (Apply for a new Business License, Renew Business License and Business Personal Property, and submit Monthly or Quarterly filings)
- Treasurer's Office:** View and Pay Personal Property and Real Estate Taxes

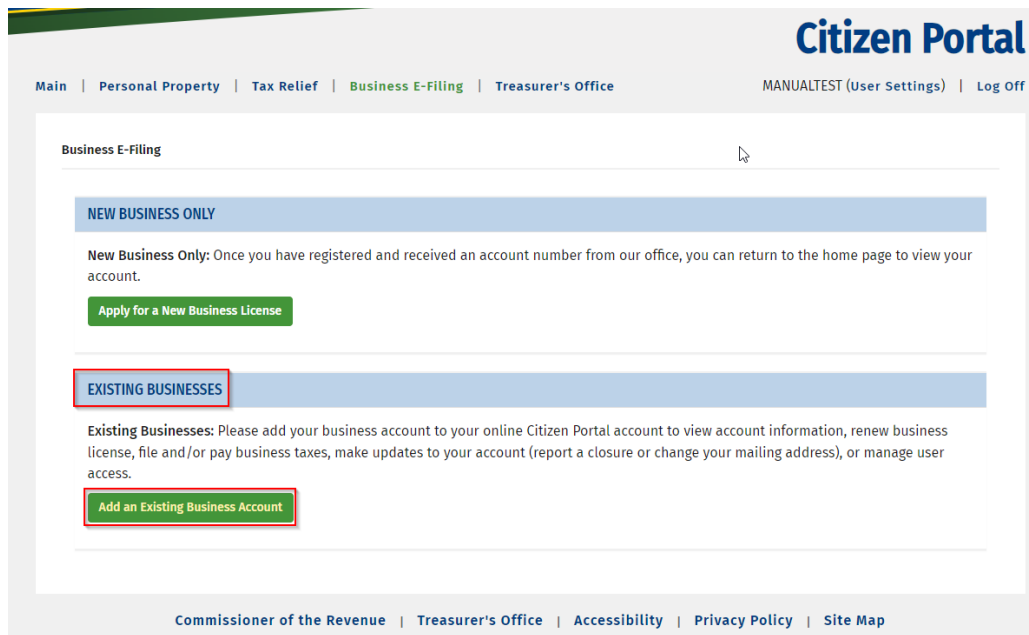
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Adding an Existing Account to the Portal

If you already have an existing account with us and created a citizen account, follow the steps below.

Business Users:

- After logging in you will be sent to the following page. Once on this page, you'll click the "Add an Existing Business Account" button.



- Next it brings you to the Associate Business Account page where you will select the Access Level and enter in the Business Account information. Each access level has a different function:
 - **Primary Owner/Manager of the business** – each business may have only **one** primary user. The primary user is generally a majority owner or managing executive of a business. *The primary user must be established prior to associating secondary users to the business account.*
 - **Secondary User** – Multiple Secondary users can be associated with each business account. The primary user associated with the business account must approve each secondary user requesting to be associated with the account.

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Primary Owner/Manager selection will look as followed:

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office MANUATEST (User Settings) | Log Off

Business E-Filing | Associate Business Account

Associate Business Account

Associate your business account with your Citizen Portal account.
Indicates required field

Access Level

I am the primary owner/manager of the business. ⓘ

Request access to this business as secondary user from the primary owner. ⓘ

Account Type

Business Account ▾

Business Account Number

FEIN or SSN ⓘ

Business Mailing Zip Code

Cancel Continue ▶

Secondary User will look as followed:

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office MANUATEST (User Settings) | Log Off

Business E-Filing | Associate Business Account

Associate Business Account

Associate your business account with your Citizen Portal account.
Indicates required field

Access Level

I am the primary owner/manager of the business. ⓘ

Request access to this business as secondary user from the primary owner. ⓘ

Account Type

Business Account ▾

Business Account Number

Cancel Continue ▶

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- Once you have selected primary owner, you will need to complete the 3 boxes that show up for Business Account Number (six digits), FEIN or SSN and Business Mailing Zip Code. Then click Continue.

Business E-Filing | Associate Business Account

Associate Business Account

Associate your business account with your Citizen Portal account.
Indicates required field

Access Level

I am the primary owner/manager of the business. ⓘ

Request access to this business as secondary user from the primary owner. ⓘ

Account Type
Business Account ▾

Business Account Number
000000

FEIN or SSN ⓘ
012345678

Business Mailing Zip Code
23832

Cancel **Continue ▶**

- After clicking Continue on the previous page, the main Business E-Filing page should be displayed showing the account has been added to your portal account.

Business E-Filing

Click on your six digit account number below to view account information, renew business license, file and/or pay business taxes, make updates to your account (report a closure or change your mailing address), or manage user access.

Accounts Due

You currently have no accounts with a balance due!

Your Accounts

| Type | Account Number | Account Name |
|------------------|----------------|------------------|
| Business Account | 661010 | TEST ACCOUNT LLC |

[Existing Business Account](#) | [Apply for New Business License](#)

All account information shown are accounts created by staff. No existing citizen information is used

- From there you can click on their account number to make any changes or updates you need to the account. Examples: Closing the business, updating the mailing address or contact information and renewing the business license.

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office MANUALTEST (User Settings) | Log Off

Business E-Filing | 661010

Owner Name
TEST ACCOUNT LLC

Business Trading Name
TEST ACCOUNT LLC

Business License Balance and Invoices

| Item/License No | License Name | Balance | Pending Payments | Total Amount Due |
|-----------------|--------------|---------|------------------|------------------|
| Total | | \$0.00 | \$0.00 | \$0.00 |

No payment due at this time.



Business Tax Balance and Invoices

| Item No. | Item Description | Balance | Pending Payments | Total Amount Due |
|--------------|------------------|---------|------------------|------------------|
| Total | | \$0.00 | \$0.00 | \$0.00 |

No payment due at this time.


[View Account Information \[+\]](#)

Business License [-]

- Click the  icon next to the location address to report its closure.
- Click the  icon next to the mailing address to change its address.

| License No | License Name | Location Address | Contact Information (Name/Phone/Email/Mailing Address) |
|------------------|-----------------------------------|--|--|
| 517911 | TEST ACCOUNT LLC | 9901 LORI RD | 9901 LORI RD |
| Business License | BL - PERSONAL SERVICE - GENERALLY | CHESTERFIELD, VA 23832-6626 Report Business Closure If you need to close prior to today's date please contact our office at 804-748-1281 or email us at cor@chesterfield.gov. | CHESTERFIELD, VA 23832-6626 Change Contact |

Business License can be renewed by clicking the button below



Start 2023 Filing

[Add New Business Location](#) | [Change Request History](#)

[Business Specialty Tax \[+\]](#)

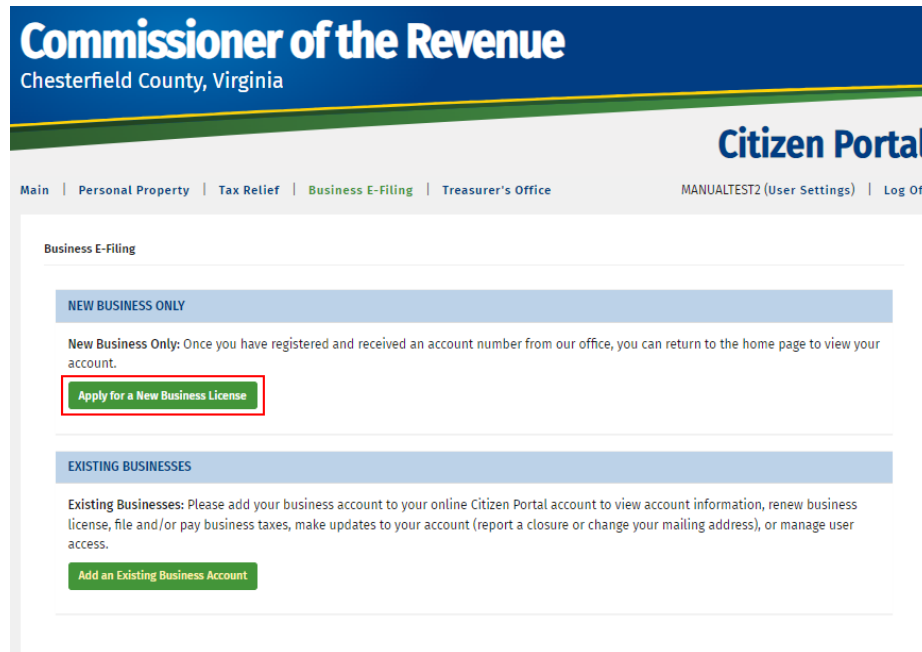
[Business Personal Property/Machinery & Tools \[+\]](#)

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Business Filing Instructions.

New Business License Application

- Once you have signed up for the portal. Click on the Business E – Filing Tab. Once under Business E-Filing click on the Apply for a New Business License Button



- On the next page there will be a brief passage on requirements that are needed before obtaining a new license. There is also a disclaimer on how long it can take to process a new business license. After reading all of that there will be the different Business Ownership Types. Please select the one you wish to apply for.

Citizen Portal

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office | MANUALTEST2 (User Settings) | Log Off

Business E-Filing | New Business Application

Type of Ownership

Business owners are required to register the business with the Commissioner of the Revenue within 30 days of commencing business operations in Chesterfield County. A late payment penalty of 10% of the tax due will be imposed along with interest if the license is not obtained within 30 days of the date the business opened. If you need assistance with registering, visit Chesterfield Commissioner of the Revenue or contact the office at cor@chesterfield.gov or 804-748-1281.

Prior to applying for a business license, you will be required to obtain a Federal Tax Identification Number (FEIN) from the IRS unless you are a Sole Proprietor.

All ownership types, other than Sole Proprietor and Partnership, require registering with the Virginia State Corporation Commission at www.scc.virginia.gov prior to applying for a business license. Any business that has a Trade/Fictitious Name must also register said name with the Virginia State Corporation Commission at www.scc.virginia.gov regardless of ownership type.

1099-NEC employees (examples: Uber/Lyft driver, DoorDash Driver or independent contractors, etc.) are required to obtain a business license.

Please allow up to 10 business days for processing. You will be notified by email when your application has been processed, at which point you may use your online account to conduct a license assessment and payment transactions. You may print a copy of your business license once all compliance requirements are met and payment has been made in full.

Select Type of Ownership:

Sole Proprietor Corporation Single Member LLC
 Partnership LLC

[Continue](#)

[Exit Application](#)

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- The next page will ask for a FEIN or SSN depending on the type of entity selected. Below is an example of what you would see if you selected Sole Proprietor:
(Sole Proprietor and Single Member LLC will show the same type of screen)

Business E-Filing | New Business Application

Ownership Type

Sole Proprietor

Primary Owner

Either enter the Federal Identification Number (FEIN) or Social Security Number (SSN) - whichever is applicable to this business entity.

| | | |
|---|--------|--|
| <p>FEIN</p> <input type="text" value="enter"/> <input type="text" value="confirm"/> | - OR - | <p>SSN</p> <input type="text" value="enter"/> <input type="text" value="confirm"/> |
|---|--------|--|

[← Back](#) [Continue ▶](#)

[Exit Application](#)

(Corporation, Partnership and LLC will show the same type of screen)

Business E-Filing | New Business Application

Ownership Type

Corporation

Primary Owner

Enter your Federal Identification Number (FEIN) to continue:

Confirm Federal Identification Number (FEIN):

[← Back](#) [Continue ▶](#)

[Exit Application](#)

All account information shown are accounts created by staff. No existing citizen information is used

- Once you have selected your entity type and put in your FEIN or SSN you will be asked to complete the primary owner info screen. Below is for Sole Proprietor. Corporation, Partnership and LLC may look slightly different.

Primary Owner (cont')

FEIN: xx - xxx4567

Business Name

Cell Phone Number

Email Address

Confirm Email

Telephone Number

Website Address (Optional)

Mailing Address

Address Line 1

Address Line 2 (Optional)

City

State

Zip Code

Zip Ext (Optional)

◀ Back

Continue ▶

- On the next page input your business physical location, trading as name, primary contact name, phone, and email.

Business E-Filing | New Business Application

Ownership Type

Corporation

Business Location

Business Physical Location

Please click the Search Address button to find your address.

[Search Address](#)

Business License Trading Name

(enter Trading Name or re-enter Business Name)

Primary Contact Name

Contact Phone

Contact Email

[Back](#) [Continue](#)

[Exit Application](#)

- Next you will need to click “Add Business Activity”

Business E-Filing | New Business Application

Ownership Type

Corporation

Business Activities

Click 'Add Business Activity' below to define your business activity at the location specified below.

9901 LORI RD
CHESTERFIELD VA 23832-6626

[Add Business Activity](#)

[Back](#)

[Exit Application](#)

All account information shown are accounts created by staff. No existing citizen information is used

- A window will pop up where you must describe in detail what type of business you will doing, the start date and your estimated gross receipts. **Estimated Gross Receipts cannot be \$0.**
- We need a detailed description to accurately classify your business. **If there is not enough detail, we may have to send the application back.**

- Once you have input the information in the above picture and hit save, the screen will look like the following, and you must click continue:

Business E-Filing | New Business Application

Ownership Type
Corporation

Business Activities

Click "Add Business Activity" below to define your business activity at the location specified below.

9901 LORI RD
CHESTERFIELD VA 23832-6626

[+ Add Business Activity](#)

Business Activities

| Description | Start Date | Estimated Gross Receipts |
|---|------------|--------------------------|
| <p>★ This is your primary activity</p> <p>TESTING ACCOUNTS</p> <p>Edit Activity</p> | 02/07/2023 | \$10,000.00 |

[← Back](#) [Continue ▶](#)

[Exit Application](#)

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- The next page will be the questionnaire. You will need to complete each question and some questions may have a follow up question if yes is selected. For example: Sales tax number, ABC number, Police permits, etc.

Please answer these questions for the business location specified below.

9901 LORI RD
CHESTERFIELD VA 23832-6626

1. List the name(s) and titles(Corporate Officers, LLC Members, or Partners) of the business owners.

You have 400 characters left.

2. Total number of employees (including yourself):

3. Are you applying for any of the following?

- Restaurant
 Food Truck
 N/A

4. Does the business have or intend to apply for an ABC license? Yes No

ABC license(s) must be active and cannot be transferred from previous owner.

5. Is the business required to collect VA Sales Tax? Yes No

If you are unsure if you need to collect VA Sales Tax, contact Virginia Department of Taxation at (804) 307-8037

6. Will the business involve internet raffles, online gambling, games of chance or similar activities? Yes No

7. Will the business involve a classification as a night club operator, taxi driver or owner, solicitor, precious metal dealer, fortune-teller, or operating an adult business? Yes No

8. Are you applying for a business license for a group home? Yes No

9. Are you applying for a license for an at home day care? Yes No

10. Does your business consist of trucking or logistics? Yes No

11. Are you a non-profit organization (501c3)? Yes No

12. Does your business involve providing security services? Yes No

13. Does your business sell gasoline? Yes No

14. Does your business perform contractor services (e.g., painting, HVAC, plumbing, electrical, etc)? Yes No

15. How are you compensated for services provided to customers?

- Payment for products sold
 Payment for services rendered
 Commissions
 Brokerage fees
 Other

16. Is your business approved for Technology Zone BPOL / M&T Tax Exemption? Yes No

17. Do you have any other supporting documents? Yes No

[◀ Back](#)

[Continue ▶](#)

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- Once you have completed the questionnaire and click continue, you will be sent to a screen that is an overview of everything you have completed. You will be able to check over all information and revisit any section that may need to be changed.

Business E-Filing | New Business License Application

Please review information you provided below carefully. Click Revisit button for the section you would like to make a change. When you are ready, click the **Submit Application** button to submit.

Ownership Type

Corporation

Primary Owner

Last 4-digit FEIN

xx - xxx4567

Business Name

TEST ACCOUNT INC

Revisit

Cell Phone Number

804 - 748 - 1281

Email Address

██████████@CHESTERFIELD.GOV

Telephone Number

804 - 748 - 1281

Website Address

Mailing Address

9901 LORI RD
CHESTERFIELD VA 23832-6626

Business Location

Business License Trading Name

TEST ACCOUNT INC

Revisit

Primary Contact Name

TEST

Contact Phone

804 - 748 - 1281

Contact Email

██████████@CHESTERFIELD.GOV

Business Physical Location

9901 LORI RD
CHESTERFIELD VA 23832-6626

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- Make sure all information provided is accurate and true.

| Business Activities | | |
|---|------------|--------------------------|
| Activities | Start Date | Estimated Gross Receipts |
| ★ This is your primary activity TESTING ACCOUNTS | 02/07/2023 | \$10,000.00 |

[Revisit](#)

Additional Questions

1. List the name(s) and titles(Corporate Officers, LLC Members, or Partners) of the business owners.

2. Total number of employees (including yourself):

3. Are you applying for any of the following?

- Restaurant
 Food Truck
 N/A

4. Does the business have or intend to apply for an ABC license?

No

5. Is the business required to collect VA Sales Tax?

No

6. Will the business involve internet raffles, online gambling, games of chance or similar activities?

No

7. Will the business involve a classification as a night club operator, taxi driver or owner, solicitor, precious metal dealer, fortune-teller, or operating an adult business?

No

8. Are you applying for a business license for a group home?

No

9. Are you applying for a license for an at home day care?

No

10. Does your business consist of trucking or logistics?

No

11. Are you a non-profit organization (501c3)?

No

12. Does your business involve providing security services?

No

13. Does your business sell gasoline?

No

14. Does your business perform contractor services (e.g., painting, HVAC, plumbing, electrical, etc)?

No

15. How are you compensated for services provided to customers?

- Payment for products sold
 Payment for services rendered
 Commissions
 Brokerage fees
 Other

16. Is your business approved for Technology Zone BPOL / M&T Tax Exemption?

No

17. Do you have any other supporting documents?

No

[Revisit](#)

- At the very bottom if all information is correct, you will type your **Full Name** for the signature and click “Submit Application”.

Certification

I understand that Chesterfield County zoning ordinances do not permit businesses to operate on all property. If the Commissioner of the Revenue issues a business license, it is still my responsibility to confirm with Chesterfield County's Planning Department that my business operation complies with the county zoning laws. The Commissioner of the Revenue reserves all rights to revoke any license(s) if a violation of the certification has occurred.

Signature must be the owner of the business, a member of the Limited Liability Company, or an officer of the Corporation. By typing your name below, you are signing this document electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

[Submit Application](#)
[Exit Application](#)

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- Once submitted you will be directed to a confirmation page that will look like the previous screen but at the top it will show a message in green saying the application was submitted.
- You can print this screen for your records or hit home and it will take you to the home screen showing any applications you have submitted.

Business E-Filing | New Business License Application

✔ Your application has been submitted. Please print out this page for your records. You will receive an email when your application is accepted.

Ownership Type

Corporation

Primary Owner

Last 4-digit FEIN

xx - xxx4567

- Home screen after you have submitted the application:

Business E-Filing

Pending/Submitted Applications

| Application Type | Description | Status | |
|------------------|--------------------------------|-------------------------|----------------------------------|
| New Business | Corporation/FEIN: xx - xxx4567 | Submitted on 08/14/2023 | View Application |

NEW BUSINESS ONLY

New Business Only: Once you have registered and received an account number from our office, you can return to the home page to view your account.

[Apply for a New Business License](#)

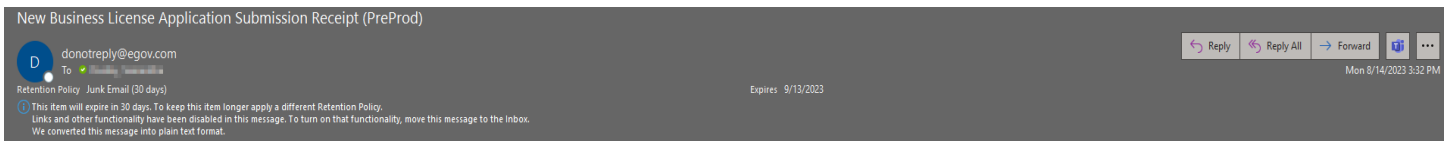
EXISTING BUSINESSES

Existing Businesses: Please add your business account to your online Citizen Portal account to view account information, renew business license, file and/or pay business taxes, make updates to your account (report a closure or change your mailing address), or manage user access.

[Add an Existing Business Account](#)

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- Following the submission of the application, you will also receive an email letting you know the application has been submitted. It will state on there in bold that it is **not** a business license, and the license will be issued once all requirements are met and payment has been received in full.



CAUTION: External Email

Thank you for submitting a new business license application to the Chesterfield County Commissioner of the Revenue. Your application will be **processed within 10 business days**. An agent will contact you if any additional information or forms are needed. You will receive an email when your application has been processed.

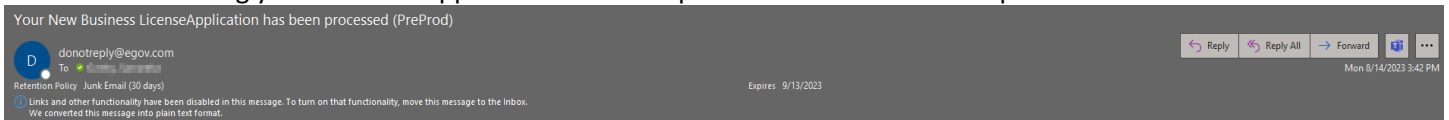
THIS IS NOT A BUSINESS LICENSE. A license certificate will only be issued once all compliance requirements are met and payment has been received in full.

Ownership Type
 Corporation
 Primary Owner FEIN
 xx - xxx4567
 Business Name
 TEST ACCOUNT INC
 Cell Phone Number
 804 - 748 - 1281
 Email Address
donotreply@chesterfield.gov
 Confirm Email
donotreply@chesterfield.gov
 Telephone Number
 804 - 748 - 1281
 Business Physical Location
 9901 LORI RD
 CHESTERFIELD VA 23832-6626
 Activities

* TESTING ACCOUNTS
 Start Date: 02/07/2023
 Estimated Gross Receipts: \$10,000.00

Submitted by
 MANUALTEST2
 Submitted on
 08/14/2023 15:32

- After the business license application has been approved by someone in our office, you will receive a follow up email letting you know the application has been processed. See email example below.



Thank you for submitting a new business license application to the Chesterfield County Commissioner of the Revenue. Your application has been processed. You may now use your online account to view account information, submit business license filings, make updates to your account, or manage user access.

Your account number is 661011

THIS IS NOT A BUSINESS LICENSE. A license certificate will only be issued once all compliance requirements are met and payment has been received in full.

Ownership Type
 Corporation
 Primary Owner FEIN
 xx - xxx4567
 Business Name
 TEST ACCOUNT INC
 Cell Phone Number
 804 - 748 - 1281
 Email Address
donotreply@chesterfield.gov
 Confirm Email
donotreply@chesterfield.gov
 Telephone Number
 804 - 748 - 1281
 SCC Verified
 YES
 Workers Comp
 N/A
 Business Physical Location
 9901 LORI RD
 CHESTERFIELD VA 23832-6626
 Activities

* TESTING ACCOUNTS
 Start Date: 02/07/2023
 Estimated Gross Receipts: \$10,000.00
 Selected Classification Code(s) for this activity:

* BUSINESS SERVICE - GENERALLY

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Renewing a Business License

- Log into your portal account to start the renewal process for your business account.

Please note that you must enroll into the portal whether you have a new business or need to associate an existing license. You will **not be able to renew until you have enrolled and added the existing business to your account.*

- The main view once you log into the portal will look as followed:

The screenshot displays a web portal interface for a business account. At the top, there is a navigation bar with links: Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office. On the right side of the navigation bar, it shows 'MANUALTEST (User Settings) | Log Off'. Below the navigation bar, the page title is 'Business E-Filing | 661010'. The main content area is divided into several sections:

- Owner Name:** TEST ACCOUNT LLC
- Business Trading Name:** TEST ACCOUNT LLC
- Business License Balance and Invoices:** A table showing a total balance of \$0.00 and pending payments of \$0.00. Below the table, it states 'No payment due at this time.'
- Business Tax Balance and Invoices:** A table showing a total balance of \$0.00 and pending payments of \$0.00. Below the table, it states 'No payment due at this time.'
- View Account Information [+]**
- Business License [+]**
- Business Specialty Tax [+]**
- Business Personal Property/Machinery & Tools [+]**
- Manage User Access [+]**

At the bottom of the page, there are two buttons: 'Go Back' and 'Remove Account'.

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- To start the renewal, you will need to click Business License [+] and then the “Start 20XX Filing” button on the home page of the portal. (The button will change what it says year to year based on what year you will be renewing)

[Business E-Filing](#) | 661010

Owner Name: TEST ACCOUNT LLC
 Business Trading Name: TEST ACCOUNT LLC

[Business License Balance and Invoices](#)

| Item/License No | License Name | Balance | Pending Payments | Total Amount Due |
|-----------------|--------------|---------------|------------------|------------------|
| Total | | \$0.00 | \$0.00 | \$0.00 |

No payment due at this time.



[Business Tax Balance and Invoices](#)

| Item No. | Item Description | Balance | Pending Payments | Total Amount Due |
|--------------|------------------|---------------|------------------|------------------|
| Total | | \$0.00 | \$0.00 | \$0.00 |

No payment due at this time.

[View Account Information \[+\]](#)

[Business License \[-\]](#)

- Click the  icon next to the location address to report its closure.
- Click the  icon next to the mailing address to change its address.

| License No | License Name | Location Address | Contact Information (Name/Phone/Email/Mailing Address) |
|----------------------------------|------------------------------------|--|---|
| 517911 | TEST ACCOUNT LLC | 9901 LORI RD | 9901 LORI RD |
| Business License | BL - PERSONAL SERVICE - | CHESTERFIELD, VA 23832-6626 | CHESTERFIELD, VA 23832-6626  |
| Add New Activity | GENERALLY |  Report Business Closure | Change Contact |
| | View/Print License | If you need to close prior to today's date please contact our office at 804-748-1281 or email us at cor@chesterfield.gov . | |

[Start 2023 Filing](#)

[Add New Business Location](#) | [Change Request History](#)

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- Once you have selected the “Start 20XX Filing” button, you will be brought to the next page where you will need to input your Actual Gross Receipts/Purchases/Quantity. Below the box for the gross receipts, you can attach additional files if necessary for your renewal. You will then have to check the box certifying that the information on the declaration is true and correct. Following that you will be required to type your name, phone number, email and confirm the email.

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office MANUALTEST (User Settings) | Log Off

Business E-Filing | 661010 > Business Filing

License Number - 517913

| | |
|---|---|
| Tax Year 2023 | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |
| Business License Name TEST ACCOUNT LLC | Tax Period 1/1/2023 - 12/31/2023 |
| License No 517913 BUSINESS SERVICE - GENERALLY | |

Actual Receipts/Purchases/Quantity

Filing Date

08/14/2023

Qualified for Technology Zone?

Date Qualified for Tech Zone (Optional)

File Upload

No file chosen

I certify that the information on this 2023 declaration is true and correct.

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

Phone Number of Submitter :

Email of Submitter :

Confirm Email :

All account information shown are accounts created by staff. No existing citizen information is used

- Once Submit has been clicked at the bottom, it will take you to the Filing Submitted Confirmation page. You should also receive a confirmation email with the same information, letting you know it's been submitted, and the license will be issued once all requirements are met.

Business E-Filing | 661010 > Filing Submitted 517913

✔ You've successfully submitted your filing for the license below, but you're not done yet. The Business Tangible Property and Computer Equipment filings must also be completed under the Business E-Filing Tab. A copy of your submission will be emailed for your records.

Your invoice number is 248420. Your balance on this invoice at the time of submission is \$0.00. [Click Here](#) to return to the Home screen.

| | |
|---|---|
| Tax Year 2023 | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |
| Business License Name TEST ACCOUNT LLC | Tax Period 1/1/2023 - 12/31/2023 |
| License No 517913 BUSINESS SERVICE - GENERALLY | |

Submitted Information

| | |
|---|-----------------------------------|
| Submitted On 08/14/2023 16:15 | Submitted By MANUALTEST |
|---|-----------------------------------|

Actual Receipts/Purchases/Quantity
\$5.00

Filing Date
08/14/2023

Qualified for Technology Zone?
NO

Date Qualified for Tech Zone

File Upload

I certify that the information on this 2023 declaration is true and correct.
YES

By typing my name in the box below, I wilfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

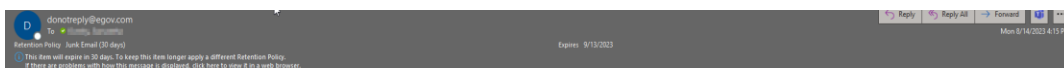
Name of Submitter :
TEST

Phone Number of Submitter :
804 - 748 - 1281

Email of Submitter :
[REDACTED]@CHESTERFIELD.GOV

Confirm Email :
[REDACTED]@CHESTERFIELD.GOV

To continue filing assessments, [click Here](#).
To view or pay this invoice, [click Here](#).



Thank you for your business filing submission to the Chesterfield County Commissioner of the Revenue. Please return to the [Citizen Portal](#) to complete your "Business Personal Property/Machinery & Tools [+]" assessments for Business Tangible Property and Computer Equipment by March 1st to avoid late filing penalty. Below is a copy of your submission details for your records.

THIS IS NOT A BUSINESS LICENSE. A license certificate will only be issued once all compliance requirements are met and payment has been received in full.

Account Number
661010
Tax Year
2023
License Name
TEST ACCOUNT LLC
License Number
517913
BUSINESS SERVICE - GENERALLY
Tax Period
1/1/2023 - 12/31/2023
Submitted by
MANUALTEST
Submitted on
08/14/2023 16:15
Actual Receipts/Purchases/Quantity
\$5.00
Filing Date
08/14/2023
Qualified for Technology Zone?
NO
Date Qualified for Tech Zone
File Upload
I certify that the information on this 2023 declaration is true and correct.
YES
By typing my name in the box below, I wilfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.
Name of Submitter :
TEST
Phone Number of Submitter :
804 - 748 - 1281
Email of Submitter :
[REDACTED]@CHESTERFIELD.GOV

All account information shown are accounts created by staff. No existing citizen information is used

Paying for your Business License through the Portal

- First you will need to log into your portal account.

Chesterfield
County Virginia

Citizen Portal

Account Information

Use your online account to:

- View current Personal Property Accounts
- Submit Tax Relief and Personal Property Forms
- File and pay - Business License Renewals / New Bus. Applications
- File - Business Tangible Personal Property / Computer Equip/ M&T
- File Specialty Taxes – Transient Occupancy, Short Term Rental, or Consumer and Consumption
- View and pay Personal Property and Real Estate Taxes
- For questions about your business license or other tax filings, please call the Commissioner of the Revenue's Office at 804-748-1281 or email cor@chesterfield.gov for assistance.
- For questions about your invoice or payment, please call the Treasurer's Office at 804-748-1201 or email treasurer@chesterfield.gov for assistance.

Commissioner of the Revenue Citizen Portal Manual (PDF)

User Name

Password

[Log On](#) [Enroll Here](#)

- [Forgot Password](#)
- [Forgot Username](#)

Commissioner of the Revenue | Treasurer's Office | Accessibility | Privacy Policy | Site Map

Chesterfield County
9901 Lori Road
Chesterfield, VA 23832

- Once logged in, any amounts owed for the Business License on your account be displayed.

Main | Personal Property | Tax Relief | **Business E-Filing** | Treasurer's Office

MANUALTEST (User Settings) | Log Off

Business E-Filing

Click on your six digit account number below to view account information, renew business license, file and/or pay business taxes, make updates to your account (report a closure or change your mailing address), or manage user access.

Accounts Due

To make a partial payment, click the (+) sign next to the account number then click the (+) next to the tax type to expand and view the invoices associated with your account. Check the 'Pay' box next to the invoice you would like to pay, enter the amount you are paying, and select 'Make Payment'.

Please note:
All business license payments will be applied to the oldest business license debt per VA code 558.1-3913. No business license can be issued until the business is compliant with all code provisions.

| Account Number | Balance | Pending Payments | Total Amount Due | Pay | Payment Amount |
|----------------------------------|---------|------------------|--------------------------------------|--------------------------|-------------------------|
| Business License | | | | | |
| 661010 (+) (TEST ACCOUNT LLC) | \$12.50 | \$0.00 | \$12.50 \$12.50 - Past Due | <input type="checkbox"/> | \$ <input type="text"/> |

[Make Payment](#)

Your Accounts

| Type | Account Number | Account Name |
|------------------|----------------|------------------|
| Business Account | 661010 | TEST ACCOUNT LLC |

[Existing Business Account](#) | [Apply for New Business License](#)

All account information shown are accounts created by staff. No existing citizen information is used

- You will need to check the box under “Pay” and the Payment Amount will be pre-filled in with the full amount due. (Payment must be made in full on this page). Once amount has been filled in, click the “Make Payment” button which will redirect you to the next page.

Accounts Due

To make a partial payment, click the (+) sign next to the account number then click the (+) next to the tax type to expand and view the invoices associated with your account. Check the 'Pay' box next to the invoice you would like to pay, enter the amount you are paying, and select 'Make Payment'.

Please note:
All business license payments will be applied to the oldest business license debt per VA code 558.1-3913. No business license can be issued until the business is compliant with all code provisions.

| Account Number | Balance | Pending Payments | Total Amount Due | Pay | Payment Amount |
|----------------------------------|---------|------------------|-------------------------------|-------------------------------------|----------------|
| Business License | | | | | |
| 661010 [+] (TEST ACCOUNT LLC) | \$12.50 | \$0.00 | \$12.50 \$12.50 - Past Due | <input checked="" type="checkbox"/> | \$ 12.50 |

Make Payment

- Review to make sure the amount is correct and click “Continue Payment”.

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office MANUALTEST (User Settings) | Log Off

Business E-Filing | Payment Method

New Payment(s)

| Account Number | Type | Account Name | Payment Amount |
|----------------|------------------|------------------|--------------------------------|
| 661010 [+] | Business Account | TEST ACCOUNT LLC | \$12.50 |
| | | | Payment Amount: \$12.50 |

You will be redirecting to Chesterfield County Treasurer's Tax Payment Portal to complete your payment.

Continue Payment

- You will be given the option to pay by Credit/Debit card or by eCheck. Select the payment method you prefer and click “Continue with Payment”.

Treasurer's Office - Online Payment Portal

Invoice Details

| Invoice: | Item | Account | Amount |
|----------------------|---------------------------|---------|----------------|
| | TEST ACCOUNT LLC - 661010 | 661010 | \$12.50 |
| Total Amount: | | | <u>\$12.50</u> |

Payment Method: CREDIT / DEBIT CARD
 eCHECK

Continue with Payment
Cancel

All account information shown are accounts created by staff. No existing citizen information is used

- The next screen will be where you will enter all your payment information. See examples below.

eCheck:

eCheck Payment Details

| | |
|--------------------------|---|
| Routing Number* | <input type="text" value="Routing Number"/> |
| Account Number* | <input type="text" value="Account Number"/> |
| Re-Enter Account Number* | <input type="text" value="Re-enter Account Number"/> |
| Bank Name* | <input type="text"/> |
| Name on Account* | <input type="text" value="Name on Account"/> |
| Billing Address* | <input type="text" value="Billing Address"/> |
| Billing City* | <input type="text" value="Billing City"/> |
| Billing State* | <input type="text" value="Select State"/> |
| Billing Zip Code* | <input type="text" value="Billing Zip Code"/> |
| Phone Number | <input type="text" value="Phone Number"/> |
| Amount | <input type="text" value="\$12.50"/> |
| Convenience Fee | <input type="text" value="Displayed after Account Type selected."/> |
| Total Amount | <input type="text" value="Displayed after Account Type selected."/> |

By checking here, I authorize Municipal Services Bureau to initiate a single ACH electronic debit to my account ending in in the amount of on 08/14/2023. I agree that ACH transactions I authorize comply with all applicable laws. Once payment is authorized, there cannot be any changes or corrections. I understand that I may call (573) 783-7847 during normal business hours if I have any questions.
It is recommended that you print a copy of this authorization and maintain it for your records.

Credit/Debit Card:

Treasurer's Office - Online Payment Portal

Credit-Card Payment Details

| | |
|-------------------|--|
| Card Number* | <input type="text" value="Card Number"/> |
| Card Type* | <input type="text" value="Displayed after Card entered."/> |
| Expiration Date* | <input type="text" value="Expiration Date (MM/YY)"/> |
| CVV Number* | <input type="text" value="CVV Number"/> |
| Name on Card* | <input type="text" value="Name on Card"/> |
| Billing Address* | <input type="text" value="Billing Address"/> |
| Billing City* | <input type="text" value="Billing City"/> |
| Billing State* | <input type="text" value="Select State"/> |
| Billing Zip Code* | <input type="text" value="Billing Zip Code"/> |
| Phone Number | <input type="text" value="Phone Number"/> |
| Amount | <input type="text" value="\$12.50"/> |
| Convenience Fee | <input type="text" value="Displayed after Card entered."/> |
| Total Amount | <input type="text" value="Displayed after Card entered."/> |

All account information shown are accounts created by staff. No existing citizen information is used

- Once you click “Submit Payment” you will receive an email with the Payment Receipt, and you will also receive an email showing the payment was made to the account.
- **Please note that once payment is made it will take 24-48 hours for the business license to be available to print. You will be notified once the license is ready.**



Gila LLC/MSB Receipt

| | |
|--|------------------------|
| Transaction Date: Oct 7 2022 11:11AM | Reference: See Below |
| Name: John Smith | Payment id: CC1457747 |
| Payment Method: VISA | Amount: \$80.00 |
| Last 4 of CC: 1111 | Vendor Fee: \$8.00 |
| City/State/Zip: Chesterfield, VA 23832 | Total Payment: \$88.00 |

THANK YOU FOR YOUR PAYMENT

Please allow up to **2 business days for processing of your payment This processing time does not reflect the **14 day check hold period** that may be needed by the County, in order for the payment to clear or otherwise reconcile your account(s). Gila LLC/MSB assumes no responsibility for any time lapse or delay by the County in the processing of your payment(s) as a result of this check hold or processing time.

Respectfully,

Gila LLC/MSB
P.O. Box 16755
Austin, Texas 78761
Toll Free: (800) 616-0166

From: donotreply@egov.com <donotreply@egov.com>
Sent: Friday, October 7, 2022 11:11:57 AM
To: Torres, Julian <TorresJA@chesterfield.gov>
Subject: Payment Receipt (test)

CAUTION: External Email

Thank you for entering a payment to the Chesterfield County. For your records, a summary of the requested transaction is provided below. Please note that this transaction is NOT complete until funds are transferred from your designated financial institution and you should monitor your bank account to ensure the payment is honored. If the transaction is rejected for any reason, your payment will be reversed and the bill reinstated.

THIS IS A STATEMENT OF PAYMENT ONLY. IT IS NOT A BUSINESS LICENSE.

Payment Information

Business Account Account Number 647711

Amount Paid: \$80.00

Payment Date: 10/7/2022

Service Fee: \$8.00

Total Amount Paid: \$88.00

Payment Number: 1457747

[Access the Chesterfield County Citizen Portal](#)

Do not reply to this email. Contact the Commissioner of the Revenue's office at 804-748-1281 or email cor@chesterfield.gov with questions or concerns.

All account information shown are accounts created by staff. No existing citizen information is used

Adding a New Classification to an Existing License

- Log into your portal account

- Once logged into your portal account you will see a list of your associated Business Accounts, select the account number for the business you would like to add the new classification to.



Your Accounts

| Type | Account Number | Account Name |
|------------------|----------------|------------------|
| Business Account | 661010 | TEST ACCOUNT LLC |

[Existing Business Account](#) | [Apply for New Business License](#)

- After the account has been selected, you will be taken to the following screen where you will have the option to select the "Add New Activity" button. Click that button to add a new classification.

Business License [-]

- Click the  icon next to the location address to report its closure.
- Click the  icon next to the mailing address to change its address.

| License No | License Name | Location Address | Contact Information (Name / Phone / Email / Mailing Address) |
|----------------------------|---|---|---|
| 517911 Business License | TEST ACCOUNT LLC BL - PERSONAL SERVICE - GENERALLY View/Print License | 9901 LORI RD CHESTERFIELD, VA 23832-6626 Report Business Closure If you need to close prior to today's date please contact our office at 804-748-1281 or email us at cor@chesterfield.gov . | 9901 LORI RD CHESTERFIELD, VA 23832-6626 Change Contact |

All account information shown are accounts created by staff. No existing citizen information is used

- Once that button is selected it will take you to the following screen where it shows all the business information already on file and the classification already on the account. On that page you will also click the button that says, "Add Business Activity".

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office MANUALTEST (User Settings) | Log Off

Business E-Filing | New Business Activities

Business Activities

Click "Add Business Activity" below to define your new business activity at the location specified below.

9901 LORI RD
CHESTERFIELD VA 23832-6626

Current Business Activities

| Description | Classification | Start Date | End Date |
|------------------------------|----------------|------------|------------|
| PERSONAL SERVICE - GENERALLY | 000100-01 | 08-14-2021 | 08-14-2021 |

New Business Activities

Add Business Activity

Exit Application

- On the next page you will be asked to explain the business activity, provide a start date and the estimated gross receipts for the new classification.

Business Activities

New Business Activity

Describe in detail the nature of the business

You have 500 characters left.

Start Date ⓘ

Estimated Gross Receipts

\$

All account information shown are accounts created by staff. No existing citizen information is used

- Once that information has been entered and you click the save button, it will redirect you to the main page where you will see the new classification has been added to the account.

[Business E-Filing](#) | [New Business Activities](#)

Business Activities

Click "Add Business Activity" below to define your new business activity at the location specified below.

9901 LORI RD
CHESTERFIELD VA 23832-6626

Current Business Activities

| Description | Classification | Start Date | End Date |
|------------------------------|----------------|------------|------------|
| PERSONAL SERVICE - GENERALLY | 000100-01 | 08-14-2021 | 08-14-2021 |

New Business Activities

[+ Add Business Activity](#)

| Description | Start Date | Estimated Gross Receipts |
|---|------------|--------------------------|
| Selling Guides Edit Activity Delete Activity | 06/13/2023 | \$10,000.00 |

[Continue](#) ▶

[Exit Application](#)

- Next, click on the Continue button in the bottom corner which will direct you to complete the classification affidavit for this new activity. Complete the affidavit in its entirety and click continue in the bottom right corner.

All account information shown are accounts created by staff. No existing citizen information is used

- Once you click continue it will bring you to the confirmation page where you will review all answers submitted on the affidavit, sign and click submit.

New Business Activities

| Activities | Start Date | Estimated Gross Receipts | Revisit |
|----------------|------------|--------------------------|--|
| Selling Guides | 06/13/2023 | \$10,000.00 | Revisit |

Additional Questions

1. List the name(s) and titles(Corporate Officers, LLC Members, or Partners) of the business owners.
2. Total number of employees (including yourself):
3. Are you applying for any of the following?
 Restaurant
 FoodTruck
 N/A
4. Does the business have or intend to apply for an ABC license?
5. Is the business required to collect VA Sales Tax?

 If Yes, please enter your VA State Sales Tax ID number:
6. Will the business involve internet raffles, online gambling, games of chance or similar activities?
7. Will the business involve a classification as a night club operator, taxi driver or owner, solicitor, precious metal dealer, fortune-teller, or operating an adult business?
8. Are you applying for a business license for a group home?
9. Are you applying for a license for an at home day care?
10. Does your business consist of trucking or logistics?
11. Are you a non-profit organization (501c3)?
12. Does your business involve providing security services?
13. Does your business sell gasoline?
14. Does your business perform contractor services (e.g., painting, HVAC, plumbing, electrical, etc)?
15. How are you compensated for services provided to customers?
 Payment for products sold
 Payment for services rendered
 Commissions
 Brokerage fees
 Other
16. Is your business approved for Technology Zone BPOL / M&T Tax Exemption?
17. Do you have any other supporting documents?

[Revisit](#)

Certification

I understand that Chesterfield County zoning ordinances do not permit businesses to operate on all property. If the Commissioner of the Revenue issues a business license, it is still my responsibility to confirm with Chesterfield County's Planning Department that my business operation complies with the county zoning laws. The Commissioner of the Revenue reserves all rights to revoke any license(s) if a violation of the certification has occurred.

Signature must be the owner of the business, a member of the Limited Liability Company, or an officer of the Corporation. By typing your name below, you are signing this document electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Enter full name for your signature



[Submit Application](#)









All account information shown are accounts created by staff. No existing citizen information is used

- Lastly you will be directed to the confirmation page letting you know it was submitted and someone will review the submission. You should also receive an email of the submission.
- **The new classification will not be visible on the account until someone from our office has reviewed and approved the additional classification.**
- Once approved by someone in our office the new classification will show up on the portal with the original classification.

[View Account Information \[+\]](#)

[Business License \[-\]](#)

- Click the  icon next to the location address to report its closure.
- Click the  icon next to the mailing address to change its address.

| License No | License Name | Location Address | Contact Information (Name/Phone/Email/Mailing Address) |
|--|--|--|--|
| 517911 Business License  | TEST ACCOUNT LLC BL - PERSONAL SERVICE - GENERALLY  | 9901 LORI RD CHESTERFIELD , VA 23832-6626  Report Business Closure If you need to close prior to today's date please contact our office at 804-748-1281 or email us at cor@chesterfield.gov . | 9901 LORI RD CHESTERFIELD , VA 23832-6626  Change Contact |
| 517911 000300-01 RETAIL MERCHANT - GENERALLY  | TEST ACCOUNT LLC BL - RETAIL MERCHANT - GENERALLY  | 9901 LORI RD CHESTERFIELD , VA 23832-6626  Report Business Closure If you need to close prior to today's date please contact our office at 804-748-1281 or email us at cor@chesterfield.gov . | 9901 LORI RD CHESTERFIELD , VA 23832-6626  Change Contact |

All account information shown are accounts created by staff. No existing citizen information is used

Business Personal Property and Specialty Tax Filing Instructions

Filing Business Personal Property

- First you will log into your account and on the main screen you will see any outstanding invoices due and a list of associated accounts.

The screenshot shows the 'Business E-Filing' section of a web application. It includes a navigation bar with links for 'Main', 'Personal Property', 'Tax Relief', 'Business E-Filing', and 'Treasurer's Office'. The main content area has a sub-header 'Business E-Filing' and instructions for users to click on their account number to view information or pay taxes. Below this is a section titled 'Accounts Due' with instructions on how to make a partial payment. A table lists the accounts due, with columns for 'Account Number', 'Balance', 'Pending Payments', 'Total Amount Due', 'Pay', and 'Payment Amount'. The table shows one account: '661010 [+] (TEST ACCOUNT LLC)' with a balance of \$24.60 and a total amount due of \$24.60, marked as 'Past Due'. There is a 'Make Payment' button and a 'Select All' checkbox. At the bottom, there is a section for 'Your Accounts' with a table showing the account type, number, and name.

| Account Number | Balance | Pending Payments | Total Amount Due | Pay | Payment Amount |
|-------------------------------------|---------|------------------|--------------------------------------|--------------------------|-------------------------|
| Business License | | | | | |
| 661010 [+] (TEST ACCOUNT LLC) | \$24.60 | \$0.00 | \$24.60 \$24.60 - Past Due | <input type="checkbox"/> | \$ <input type="text"/> |
| Select All <input type="checkbox"/> | | | | | |

| Type | Account Number | Account Name |
|------------------|----------------|------------------|
| Business Account | 661010 | TEST ACCOUNT LLC |

- Click on the account number for the business you would like to file the Business Personal Property return for.
- Once selected the account to file, scroll towards the bottom and click the “+” next to Business Personal Property/ Machinery & Tools. There will be two buttons on the right side, one showing “Return of Business Computer Equipment” and one showing “Return of Business Tangible Personal Property”.

Business Personal Property/Machinery & Tools [+]

Business Personal Property/Machinery & Tools [-]

| License No | License Name | Location Address | Contact Information (Name/Phone/Email/Mailing Address) | |
|--------------------------------|--|---|---|---|
| 517913 Personal Property | TEST ACCOUNT LLC CE - TEST ACCOUNT LLC | 9901 LORI RD CHESTERFIELD , VA 23832-6626 | 9901 LORI RD CHESTERFIELD , VA 23832-6626 | Return of Business Computer Equipment |
| 517913 Personal Property | TEST ACCOUNT LLC TP - TEST ACCOUNT LLC | 9901 LORI RD CHESTERFIELD , VA 23832-6626 | 9901 LORI RD CHESTERFIELD , VA 23832-6626 | Return of Business Tangible Personal Property |

All account information shown are accounts created by staff. No existing citizen information is used

- You must complete both sections even if you do not have property for one of the sections. Start by selecting “Return of Business Computer Equipment” and the following screen will come up. On the following screen you will need to enter the cost for the total of the equipment for each year as you normally would on the paper copies of the form. Once you have filled in each year (or left as zero), click “Next” at the bottom.

Business E-Filing | 661010 > Return of Business Computer Equipment

Return of Business Computer Equipment - Depreciation Information

| | |
|--|--|
| License No 517913 | Account Number 661010 |
| Tax Year 2023 | Tax Period 1/1/2023 - 12/31/2023 |
| Business License Name TEST ACCOUNT LLC | Location Address 9901 LORI RD CHESTERFIELD, VA 23832-6626 |

| Year Acquired | Cost | Depreciation Percentage | Assessed Value |
|-----------------------|-----------------------------------|-------------------------|----------------|
| 2023* | <input type="text" value="0.00"/> | 0.90% | \$0.00 |
| 2022* | <input type="text" value="0.00"/> | 0.50% | \$0.00 |
| 2021* | <input type="text" value="0.00"/> | 0.40% | \$0.00 |
| 2020* | <input type="text" value="0.00"/> | 0.20% | \$0.00 |
| 2019* | <input type="text" value="0.00"/> | 0.10% | \$0.00 |
| 2018* | <input type="text" value="0.00"/> | 0.05% | \$0.00 |
| 2017 and Prior Years* | <input type="text" value="0.00"/> | 0.01% | \$0.00 |
| Total | \$0.00 | | \$0.00 |

* Previous submitted values could not be located.

All account information shown are accounts created by staff. No existing citizen information is used

- After clicking “Next”, you will be taken to the page where you must attach a copy of your itemized asset list. Attaching an asset listing will be required and attaching a Federal Deprecation schedule (Form 4562) will be optional. You will have to select the “Document Type” and then select the document you wish to upload. Once that is completed, click “Next”.

Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office MANUALTEST (User Settings) | Log Off

Business E-Filing | 661010 > Return of Business Computer Equipment

Return of Business Computer Equipment - Supporting Documents

| | |
|--|---|
| License No 517913 | Account Number 661010 |
| Tax Year 2023 | Tax Period 1/1/2023 - 12/31/2023 |
| Business License Name TEST ACCOUNT LLC | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |

Existing Documents

1. Asset List (including Equipment Leased, Rented, or Borrowed from others as of January 1st)
 - Itemized List only form.doc - 46.00 K
2. Federal depreciation schedule

No documents uploaded!

Upload New Document

Document Type

Select ▼

Select Document to Upload

No file chosen

Allowed file types: pdf, doc, docx, xls, xlsx, png, jpg, jpeg, gif

- The next page will be the review and certify page. It will list out the figures you had entered for each year along with the attachments from the prior page. If everything looks correct, click the button next to the certify statement, enter your name, phone number, email address, confirm the email address again and click "Submit".

Filing Date

08/14/2023

Depreciation Information

| Year Acquired | Cost | Depreciation Percentage | Assessed Value |
|-----------------------|-----------------|-------------------------|-----------------|
| 2023* | \$0.00 | 0.90% | \$0.00 |
| 2022* | \$500.00 | 0.50% | \$250.00 |
| 2021* | \$0.00 | 0.40% | \$0.00 |
| 2020* | \$0.00 | 0.20% | \$0.00 |
| 2019* | \$0.00 | 0.10% | \$0.00 |
| 2018* | \$0.00 | 0.05% | \$0.00 |
| 2017 and Prior Years* | \$0.00 | 0.01% | \$0.00 |
| Total | \$500.00 | | \$250.00 |

* Previous submitted values could not be located.

Tech Zone rebate submitted.



Supporting Documents

- Asset List
 - Itemized List only form.doc - 46.00 K
- Federal depreciation schedule

No documents uploaded!

I certify that the information on this 2023 declaration is true and correct.

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

Phone Number of Submitter :

Email of Submitter :

Confirm Email :

All account information shown are accounts created by staff. No existing citizen information is used

- After submitting you will receive an email letting you know that section of the return was filed. It will display all the figures entered for each year, the attachments, etc. Example below.

Thank you for your Return of Business Computer Equipment submission to the Chesterfield County Commissioner of the Revenue. Below is a copy of your submission details for your records.

License Number
517913
License Name
TEST ACCOUNT LLC
Account Number
661010
Tax Year
2023
Tax Period
1/1/2023 - 12/31/2023
Submitted by
MANUALTEST
Submitted on
08/14/2023 16:52
Filing Date
08/14/2023

| Depreciation Information | | | | |
|--------------------------|----------|-------------------------|----------------|--|
| Year Acquired | Cost | Depreciation Percentage | Assessed Value | |
| 2023* | \$0.00 | 0.90% | \$0.00 | |
| 2022* | \$500.00 | 0.50% | \$250.00 | |
| 2021* | \$0.00 | 0.40% | \$0.00 | |
| 2020* | \$0.00 | 0.20% | \$0.00 | |
| 2019* | \$0.00 | 0.10% | \$0.00 | |
| 2018* | \$0.00 | 0.05% | \$0.00 | |
| 2017 and Prior Years* | \$0.00 | 0.01% | \$0.00 | |
| Total | \$500.00 | | \$250.00 | |

* Previous submitted values could not be located.

Tech Zone rebate submitted.

NO

Provided Document(s)

1. Asset List
 - * Itemized List only form.doc - 46.00 K
2. Federal depreciation schedule - Not provided

I certify that the information on this 2023 declaration is true and correct.

YES

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

test

Phone Number of Submitter :

804 - 748 - 1281

Email of Submitter :

cor@chesterfield.gov

Confirm Email :

cor@chesterfield.gov

Do not reply to this email. Contact the Commissioner of the Revenue's office at 804-748-1281 or email cor@chesterfield.gov with questions or concerns.



- You will now have to go back to the main account and follow the same steps as above to complete the remaining section. (In this example the "Return of Business Tangible Personal Property").
- Once you have submitted both sections, you will have completed the requirements for filing the Business Personal Property return.

All account information shown are accounts created by staff. No existing citizen information is used

Short-Term Rental Annual Renewal


- The annual Short Term Rental filing can be found under the Business License tab under the Business E-Filing page. To start the Short-Term Annual filing, click on “Start 20XX Filing” button on the home page of their portal.

Business License [-]

- Click the  icon next to the location address to report its closure.
- Click the  icon next to the mailing address to change its address.

| License No | License Name | Location Address | Contact Information (Name/Phone/Email/Mailing Address) |
|--|--|--|--|
| 517914 Business License Add New Activity | TEST ACCOUNT INC. BL - RETAIL MERCHANT - SHORT-TERM RENTAL View/Print License | 9901 LORI RD CHESTERFIELD , VA 23832-6626  Report Business Closure If you need to close prior to today's date please contact our office at 804-748-1281 or email us at cor@chesterfield.gov . | 9901 LORI RD CHESTERFIELD , VA 23832-6626  Change Contact |

- The annual form needs the following information. This is the same information that would be provided on the paper renewal form.

| | |
|---|---|
| Tax Year 2023 | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |
| Business License Name TEST ACCOUNT INC. | Tax Period 1/1/2023 - 12/31/2023 |
| License No 517914 RETAIL MERCHANT - SHORT-TERM RENTAL | |
| Filing Date 08/15/2023  | |
| 2023 total gross rental receipts <input type="text"/> | |
| Rental receipts for personal property rentals involving personal services for the operation of the rented property <input type="text"/> | |
| Adjusted Gross Rental Receipts <input type="text" value="0.00"/> | |
| Rental receipts from Line 3 from transactions involving rental periods of 92/270 consecutive days or less, including extensions and renewals <input type="text"/> | |
| Rental receipts from transactions for rental periods of 92/270 consecutive days or less, including extensions and renewals, involving a person or persons affiliated with the lessor <input type="text"/> | |
| Adjusted Gross Short-Term Rental Receipts <input type="text"/> | |
| Qualified for Technology Zone? ▼ | |
| Date Qualified for Tech Zone (Optional) <input type="text"/>  | |
| File Upload <input type="button" value="Choose File"/> No file chosen | |

- There is an option to upload additional documentation if you wish to provide supporting documentation. This is not required.

All account information shown are accounts created by staff. No existing citizen information is used

- Check the box certifying the information on this 2022 declaration is true and correct. The following fields including their name, phone number, email and confirmed email must be completed. Once submitted you will receive a submission receipt via email.

File Upload
Choose File No file chosen

I certify that the information on this 2023 declaration is true and correct.

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

Phone Number of Submitter :

Email of Submitter :

Confirm Email :

Cancel

Submit

THIS IS NOT A BUSINESS LICENSE. A license certificate will only be issued once all compliance requirements are met and payment has been received in full.

Account Number
661012
Tax Year
2023
License Name
TEST ACCOUNT INC.
License Number
517914
RETAIL MERCHANT - SHORT-TERM RENTAL
Tax Period
1/1/2023 - 12/31/2023
Submitted by
MANUALTEST
Submitted on
08/15/2023 08:56
Actual Receipts/Purchases/Quantity
0
Filing Date
08/15/2023
2023 total gross rental receipts
\$530.00
Rental receipts for personal property rentals involving personal services for the operation of the rented property
\$0.00
Adjusted Gross Rental Receipts
\$530.00
Rental receipts from Line 3 from transactions involving rental periods of 92/270 consecutive days or less, including extensions and renewals
\$530.00
Rental receipts from transactions for rental periods of 92/270 consecutive days or less, including extensions and renewals, involving a person or persons affiliated with the lessor
\$0.00
Adjusted Gross Short-Term Rental Receipts
\$530.00
Qualified for Technology Zone?
NO
Date Qualified for Tech Zone
File Upload
I certify that the information on this 2023 declaration is true and correct.
YES
By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.
Name of Submitter :
TEST
Phone Number of Submitter :
804 - 748 - 1281
Email of Submitter :
TEST@CHESTERFIELD.GOV
Confirm Email :
TEST@CHESTERFIELD.GOV

All account information shown are accounts created by staff. No existing citizen information is used

Short Term Rental Quarterly Filing

- Log into your portal account

- Once logged into your portal account and you will see a list of your associated Business Accounts, select the account number for the business you would like to file for.

Your Accounts

| Type | Account Number | Account Name |
|------------------|----------------|-------------------|
| Business Account | 661012 | TEST ACCOUNT INC. |

[Existing Business Account](#) | [Apply for New Business License](#)

- Scroll down and open the Business Specialty Tax tab.
- Click on “Start X Quarter 20XX Filing” to begin filing the quarterly return.

Business Specialty Tax [-]

- Select the 'Start Filing' button to report your gross receipts for a particular tax period. If a 'Start Filing' button is not displayed for a tax period in which you did have gross receipts, please contact the Commissioner of the Revenue's office at 804-748-1281 or cor@chesterfield.gov.
- **Intermediaries in Virginia are subject to § 58.1-3826 (F), (Effective October 1, 2022) Scope of transient occupancy tax.** Subject to applicable laws, an accommodations intermediary shall submit to a locality the property addresses and gross receipts for all accommodations facilitated by the accommodations intermediary in such locality. Such information shall be submitted monthly.
- All transient filings are due by the 20th of each month. Also, intermediaries are required to submit an itemized address listing by the end of each month.

| Item | Account Name | Location Address | Contact Information (Name/Phone/Email/Mailing Address) | Tax Filing |
|-----------------------------|-------------------|--|---|---|
| 517914 SHORT TERM RENTAL | TEST ACCOUNT INC. | 9901 LORI RD CHESTERFIELD , VA 23832-6626 | 9901 LORI RD CHESTERFIELD , VA 23832-6626 | Start 1st Quarter 2023 Filing |

All account information shown are accounts created by staff. No existing citizen information is used

- Complete the filing listing the gross receipts for the quarter as well as any exemptions.

| | |
|--|---|
| Tax Year 2023 | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |
| License 517914 - SHORT TERM RENTAL | Tax Period 1st Quarter 2023 |
| Filing Date 06/15/2023 | |
| Gross receipts from rentals of 92/270 DAYS OR LESS <input type="text"/> | |
| Gross receipts from rentals of MORE THAN 92/270 DAYS <input type="text"/> | |
| Total gross receipts from ALL rentals <input type="text" value="0.00"/> | |
| Total exempt rentals: | |
| Rentals of property not owned <input type="text"/> | |
| Rentals of durable medical equipment <input type="text"/> | |
| Rentals to federal, state, or local govt. agencies <input type="text"/> | |
| Rentals which are exempt from sales tax <input type="text"/> | |
| Total exempt rentals <input type="text"/> | |
| Total gross taxable rentals <input type="text" value="0.00"/> | |

- Check the box certifying the information on this 2022 declaration is true and correct. The following fields including their name, phone number, email and confirmed email must be completed. Click submit.

File Upload
 No file chosen

I certify that the information on this Quarterly declaration is true and correct.

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

Phone Number of Submitter :

Email of Submitter :

Confirm Email :

All account information shown are accounts created by staff. No existing citizen information is used

- Once submitted you will be redirected to the next screen showing your filing has been submitted. **Our office must review the submission and key before a payment will be available.**

Business E-Filing | 661012 > Filing Submitted 517914

✔ You've successfully submitted your filing for the Business Tax below. A copy of your submission will be emailed for your records.

| | |
|--|---|
| Tax Year 2023 | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |
| Item - | Tax Period 1st Quarter 2023 |
| License 517914 - SHORT TERM RENTAL | |
| Submitted Information | |

| | |
|---|-----------------------------------|
| Submitted On 08/15/2023 09:05 | Submitted By MANUALTEST |
|---|-----------------------------------|

Filing Date
08/15/2023

Gross receipts from rentals of 92/270 DAYS OR LESS
\$400.00

Gross receipts from rentals of MORE THAN 92/270 DAYS
\$0.00

Total gross receipts from ALL rentals
\$400.00

Total exempt rentals:

- You will also receive a copy of your filing via email

Thank you for your business tax filing submission to the Chesterfield County Commissioner of the Revenue. Below is a copy of your filing details for your records.

Account Number

661012

Tax Year

2023

Item

-

License

517914 - SHORT TERM RENTAL

Tax Period

1st Quarter 2023

Submitted by

MANUALTEST

Submitted on

08/15/2023 09:05

Gross Receipts/Quantity

0

Filing Date

08/15/2023

Gross receipts from rentals of 92/270 DAYS OR LESS

\$400.00

Gross receipts from rentals of MORE THAN 92/270 DAYS

\$0.00

Total gross receipts from ALL rentals

\$400.00

Total exempt rentals:

Rentals of property not owned

\$0.00

Rentals of durable medical equipment

\$0.00

Rentals to federal, state, or local govt. agencies

\$0.00

Rentals which are exempt from sales tax

\$0.00

Total exempt rentals

\$0.00

Total gross taxable rentals

\$400.00

File Upload

I certify that the information on this Quarterly declaration is true and correct.

YES

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

TEST

Phone Number of Submitter :

804 - 748 - 1281

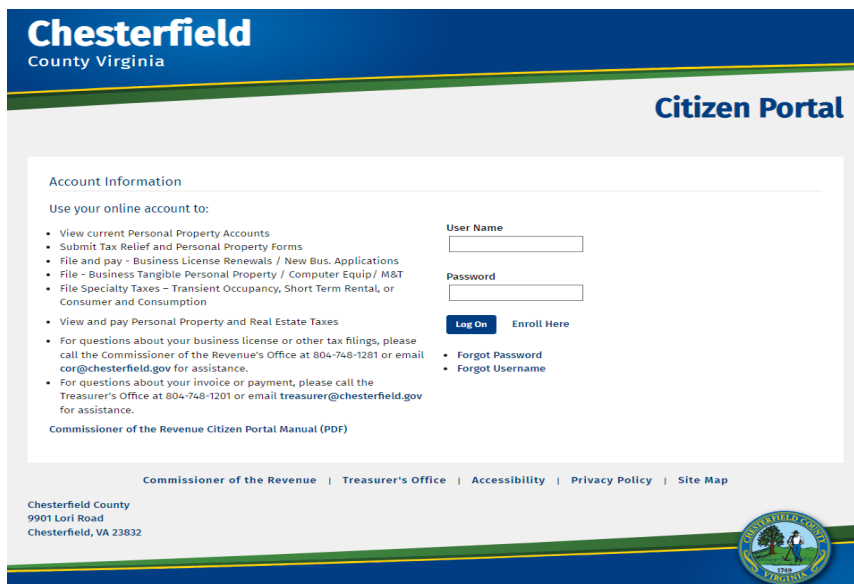
Email of Submitter :

TEST@CHESTERFIELD.GOV

All account information shown are accounts created by staff. No existing citizen information is used

Consumer/Consumption Monthly Tax Filing

- Log into your portal account



- Once logged into your portal account and you will see a list of your associated Business Accounts, select the account number for the business you would like to file for.

Your Accounts

| Type | Account Number | Account Name |
|------------------|----------------|---------------------------|
| Business Account | 661013 | TEST ACCOUNT INCORPORATED |

[Existing Business Account](#) | [Apply for New Business License](#)

- Scroll down and open the Business Specialty Tax Tab. Click on “Start (Month) 20XX Filing” to begin filing the monthly return.

Business Specialty Tax [-]

- Select the 'Start Filing' button to report your gross receipts for a particular tax period. If a 'Start Filing' button is not displayed for a tax period in which you did have gross receipts, please contact the Commissioner of the Revenue's office at 804-748-1281 or cor@chesterfield.gov.
- Intermediaries in Virginia are subject to § 58.1-3826 (f). (Effective October 1, 2022) Scope of transient occupancy tax. Subject to applicable laws, an accommodations intermediary shall submit to a locality the property addresses and gross receipts for all accommodations facilitated by the accommodations intermediary in such locality. Such information shall be submitted monthly.
- All transient filings are due by the 20th of each month. Also, intermediaries are required to submit an itemized address listing by the end of each month.

| Item | Account Name | Location Address | Contact Information (Name / Phone / Email / Mailing Address) | Tax Filing |
|---------------------------------------|---------------------------|---|--|---------------------------------------|
| 517915 Consumption Tax Electric | TEST ACCOUNT INCORPORATED | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | Start Jan 2023 Filing |
| 517915 Consumption Tax Gas | TEST ACCOUNT INCORPORATED | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | Start Jan 2023 Filing |
| 517915 Consumer Utilities Electric | TEST ACCOUNT INCORPORATED | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | Start Jan 2023 Filing |
| 517915 Consumer Utilities Gas | TEST ACCOUNT INCORPORATED | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | Start Jan 2023 Filing |

All account information shown are accounts created by staff. No existing citizen information is used

- You will need to provide the total gross receipts for the corresponding month being filed. Click the certify box. Then complete your name, phone number, and email. Click submit to file.

License Number - 517915

Tax Year
2023Location Address
9901 LORI RD
CHESTERFIELD , VA 23832-6626License
517915 - Consumption Tax ElectricTax Period
Jan 2023

Total Gross Receipts

\$

Filing Date

08/15/2023

File Upload

 No file chosenI certify that the information on this 2023 declaration is true and correct.

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

Phone Number of Submitter :

Email of Submitter :

Confirm Email :

- Once submitted you will be redirected to the next screen showing your filing has been submitted and shows the balance due.

Business E-Filing | 661013 > Filing Submitted 517915

✔ You've successfully submitted your filing for the Business Tax below. A copy of your submission will be emailed for your records.

Your invoice number is 100119. Your balance on this invoice at the time of submission is \$28,875.00.

Tax Year
2023Location Address
9901 LORI RD
CHESTERFIELD , VA 23832-6626Item
-Tax Period
Jan 2023License
517915 - Consumption Tax Electric

Submitted Information

Submitted On
08/15/2023 09:14Submitted By
MANUALTESTTotal Gross Receipts
\$25,000.00

All account information shown are accounts created by staff. No existing citizen information is used

- You will also receive an email confirmation with your filing details.

Thank you for your business tax filing submission to the Chesterfield County Commissioner of the Revenue. Below is a copy of your filing details for your records.

Account Number
661013
Tax Year
2023
Item
-
License
517915 - Consumption Tax Electric
Tax Period
Jan 2023
Submitted by
MANUALTEST
Submitted on
08/15/2023 09:14
Total Gross Receipts
\$25,000.00
Filing Date
08/15/2023
File Upload

I certify that the information on this 2023 declaration is true and correct.

YES

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

TEST

Phone Number of Submitter :

804 - 748 - 1281

Email of Submitter :

TEST@CHESTERFIELD.GOV

Access the Chesterfield County Citizen Portal <<https://gcc02.safelinks.protection.outlook.com/?url=http%3A%2F%2Fpreprd-chesterfield.virginiainteractive.org%2F&data=05%7C01%7C%7C9804c83a45448d97ba608db9d918f9c%7C05609332b9054a6bbf744807fa89857d%7C0%7C0%7C638277020759198650%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAilClOjoi2luMzllLjB1I16k1haWwvLjCjVXCI6Mn0%3D%7C3000%7C%7C%7C&sdata=ph44buEjHka3M2GETs6vZcGFju7en%2Bp%2FwVesf8qHc%3D&reserved=0>>

Do not reply to this email. Contact the Commissioner of the Revenue's office at 804-748-1281 or email cor@chesterfield.gov <<mailto:cor@chesterfield.gov>> with questions or concerns.

- If you have more than one submission repeat the above steps.

All account information shown are accounts created by staff. No existing citizen information is used

Transient Occupancy Monthly Filing

- Log into your portal account

- Once logged into your portal account and you will see a list of your associated Business Accounts, select the account number for the business you would like to file for.

Your Accounts

| Type | Account Number | Account Name |
|------------------|----------------|-------------------------|
| Business Account | 661014 | TEST ACCOUNT HOTEL INC. |

[Existing Business Account](#) | [Apply for New Business License](#)

- Scroll down and open the Business Specialty Tax Tab. Click on “Start (Month) 20XX Filing” to begin filing the monthly return.

Business Specialty Tax [-]

- Select the 'Start Filing' button to report your gross receipts for a particular tax period. If a 'Start Filing' button is not displayed for a tax period in which you did have gross receipts, please contact the Commissioner of the Revenue's office at 804-748-1281 or cor@chesterfield.gov.
- Intermediaries in Virginia are subject to § 58.1-3826 (F). (Effective October 1, 2022) Scope of transient occupancy tax.** Subject to applicable laws, an accommodations intermediary shall submit to a locality the property addresses and gross receipts for all accommodations facilitated by the accommodations intermediary in such locality. Such information shall be submitted monthly.
- All transient filings are due by the 20th of each month. Also, intermediaries are required to submit an itemized address listing by the end of each month.

| Item | Account Name | Location Address | Contact Information (Name/Phone/Email/Mailing Address) | Tax Filing |
|-------------------------------|-------------------------|---|---|---------------------------------------|
| 517916 Transient Occupancy | TEST ACCOUNT HOTEL INC. | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | 9901 LORI RD CHESTERFIELD, VA 23832-6626 | Start May 2023 Filing |

All account information shown are accounts created by staff. No existing citizen information is used

- You will need to provide the total gross receipts for the corresponding month being filed. Click the certify box. Then complete your name, phone number, and email. Click submit to file.

License Number - 517916

| | |
|--|---|
| Tax Year 2023 | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |
| License 517916 - Transient Occupancy | Tax Period May 2023 |

Total Gross Receipts

Filing Date
08/15/2023

File Upload
 No file chosen

I certify that the information on this Monthly declaration is true and correct.

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

Phone Number of Submitter :

Email of Submitter :

Confirm Email :

- Once submitted you will be redirected to the next screen showing your filing has been submitted and shows the balance due.

Business E-Filing | 661014 > Filing Submitted 517916

✔ You've successfully submitted your filing for the Business Tax below. A copy of your submission will be emailed for your records.

Your invoice number is 103187. Your balance on this invoice at the time of submission is \$134.20.

| | |
|--|---|
| Tax Year 2023 | Location Address 9901 LORI RD CHESTERFIELD , VA 23832-6626 |
| Item - | Tax Period May 2023 |
| License 517916 - Transient Occupancy | |

Submitted Information

| | |
|---|-----------------------------------|
| Submitted On 08/15/2023 10:29 | Submitted By MANUALTEST |
| Total Gross Receipts \$1,500.00 | |
| Filing Date 08/15/2023 | |

All account information shown are accounts created by staff. No existing citizen information is used

- You will also receive an email confirmation with your filing details.

Thank you for your business tax filing submission to the Chesterfield County Commissioner of the Revenue. Below is a copy of your filing details for your records.

Account Number

661014

Tax Year

2023

Item

-

License

517916 - Transient Occupancy

Tax Period

May 2023

Submitted by

MANUALTEST

Submitted on

08/15/2023 10:29

Total Gross Receipts

\$1,500.00

Filing Date

08/15/2023

File Upload

I certify that the information on this Monthly declaration is true and correct.

YES

By typing my name in the box below, I willfully declare that the information provided is true, correct, and complete. I further declare that I am authorized to file this form and I understand that the penalty for filing a false return is a Class 1 Misdemeanor.

Name of Submitter :

TEST

Phone Number of Submitter :

804 - 748 - 1281

Email of Submitter :

 @CHESTERFIELD.GOV

Access the Chesterfield County Citizen Portal <<https://gcc02.safelinks.protection.outlook.com/?url=http%3A%2F%2Fpreprd-chesterfield.virginiainteractive.org%2F&data=05%7C01%7C%7Ce2e6138fb3e44114071208db9d9c0378%7C05609332b9054a6bbf744807a89857d%7C0%7C638277065647961639%7CUnknown%7CTWFpbGZsb3d8eyJWljiMC4wLjAwMDAILCjoiV2luZmZlLjB1I6I1haWwILCjXVCi6Mn0%3D%7C3000%7C%7C%7C&sddata=qrFK9uLjwoYlF3C7BYqGJ8g2x%2Fb8Z1OioTHS8OmmA%3D&reserved=0>>

Do not reply to this email. Contact the Commissioner of the Revenue's office at 804-748-1281 or email cor@chesterfield.gov with questions or concerns.

All account information shown are accounts created by staff. No existing citizen information is used

Vehicle Personal Property Instructions

Viewing Personal Property Account details

- Log into your portal account.
- To view items under your personal property account, click “View” this will then list the items on the associated account.

The screenshot shows the 'Personal Property' section of the Citizen Portal. At the top right, it says 'Citizen Portal' and 'PPVEH1 (User Settings) | Log Off'. Below the navigation bar, there's a breadcrumb trail: 'Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office'. The main content area is titled 'Personal Property' and contains a section for 'YOUR ACCOUNTS'. It shows a table with one account: 'Personal Property' with 'Account # - 660459' and a 'View' link. Below this is a button 'Add Personal Property Account'. A message states: 'You now can view your personal property tax invoice and make payments on the Citizen Portal.' with a green button 'View/Pay Invoices'. Underneath is a section for 'ONLINE FORMS' with a list of links: 'Appeal Of Personal Property Assessment', 'Application For High Mileage Discount', 'Application For Vehicle Condition Discount', 'Boat Registration Form', 'Boat Condition Certification', 'Military Spouses Residency Relief', 'Vehicle Usage Certification', 'Vehicle Condition Certification', and 'Update Contact Information'. A note at the bottom says 'Sold or moved vehicles should be reported directly to DMV.'

- This will show you the vehicle item number, type, description, and VIN number of each item. To get item details for a specific vehicle click on the item number.

The screenshot shows the 'Personal Property' section of the Citizen Portal, displaying a list of vehicle items. At the top right, it says 'Citizen Portal' and 'PPVEH1 (User Settings) | Log Off'. Below the navigation bar, there's a breadcrumb trail: 'Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office'. The main content area is titled 'Personal Property' and contains a section for 'Your Accounts'. It shows a table with one item: '1629' (Item), 'VH - Vehicle - Regular' (Type), '1999 GMC LIGHT DUTY Jimmy 6546' (Description), and '1GKDT13V' (Identification). Below the table are two buttons: 'Go Back' and 'Remove Account'. At the bottom, there's a footer with links: 'Commissioner of the Revenue | Treasurer's Office | Accessibility | Privacy Policy | Site Map'.

All account information shown are accounts created by staff. No existing citizen information is used

- The item details will show you the Make, Model, Body Type, Title Number, VIN, and mileage we have on file either from DMV or a high mileage receipt filed.
- Your vehicle assessment will reflect on this page after April 15th each tax year below the Mileage field.

The screenshot shows the 'Citizen Portal' interface. At the top right, it says 'Citizen Portal' and 'PPVEH1 (User Settings) | Log Off'. Below the header, there are navigation links: 'Main | Personal Property | Tax Relief | Business E-Filing | Treasurer's Office'. The main content area shows a breadcrumb trail: 'Personal Property > 660459 > 1999 GMC LIGHT DUTY Jimmy 6546'. Below this is a section titled 'Item Details' which contains a table with the following information:

| Field Name | Field Value |
|----------------|----------------|
| Make | GMC LIGHT DUTY |
| Model | Jimmy |
| Body Type | Utility 4D 4WD |
| Title Number | 6546 |
| VIN | 1GKDT13 |
| Mileage | 0 |
| Assessed Value | \$0 (2023) |

At the bottom left of the item details section, there is a 'Go Back' button. At the bottom of the page, there are links for 'Commissioner of the Revenue | Treasurer's Office | Accessibility | Privacy Policy | Site Map'.

The following Personal Property forms can be filed with the online portal.

ONLINE FORMS

- [Appeal Of Personal Property Assessment](#)
- [Application For High Mileage Discount](#)
- [Application For Vehicle Condition Discount](#)
- [Boat Registration Form](#)
- [Boat Condition Certification](#)
- [Military Spouses Residency Relief](#)
- [Vehicle Usage Certification](#)
- [Vehicle Condition Certification](#)
- [Update Contact Information](#)

Sold or moved vehicles should be reported directly to [DMV](#).

To report a sold or moved vehicle, please contact DMV directly.

*****You must have your account number and property information available to complete the forms*****

All account information shown are accounts created by staff. No existing citizen information is used

Appeal of Personal Property Assessment

- Log into your portal account to see the Online Forms. From the selection click on “Appeal of Personal Property Assessment”. It will direct you to an online form to complete. Please be detailed on the form and attach any necessary supporting documentation.

Appeal Of Personal Property Assessment

Account #

Owner's Name

Email Address

Phone #

Mailing Address

Vehicle Information

Tax periods covered by the challenged assessment

Briefly describe the reason for the appeal, e.g. dispute vehicle valuation or tax assessed

Grounds upon which the taxpayer relies

Remedy sought

Any other relevant facts to the contention

- Personal Property Appeals must be filed within one year from the end of the tax year for which the assessment is made, or within one year from the date of the assessment, whichever is later, in accordance with VA Code 558.1-3980.
- Appealing your assessment does not guarantee a reduction nor does the filing of an appeal relieve the payment of the tax bill by the respective due date. If the assessment is later reduced because of an appeal and the original bill was paid, the county will issue a tax refund, provided all other taxes are current.

Attachments

Add

Remove

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

All account information shown are accounts created by staff. No existing citizen information is used

Application for High Mileage Discount

- Log into your portal account to see the Online Forms. From the selection click on “Application for High Mileage Discount”. It will direct you to an online form to complete. **You must attach a copy of proof of mileage.**

Application For High Mileage Discount

Account #

Owner's Name

FEIN or SSN

Email

Phone #

Mailing Address

Vehicle Information

License Plate #

Odometer reading as of January 1 Or Purchased Date

This application form **must be filed annually until the mileage reaches 250,001**, then no further filing is required. Please submit one form per vehicle.

The high mileage discount **DOES NOT APPLY to MOTORCYCLES, MOTOR HOMES, LARGE TRUCKS** with a weight rating of 10,000 lbs. or more, or **TRAILERS**.

APPLICATION CHECKLIST

- Complete and sign the application
- Attach copies of proof i.e., oil change receipts, state inspection slips, repair bills, detailed mileage logs. **Please do not send the originals.**
- Return the application prior to payment due date

Attachments

Add

Remove

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

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Application for Vehicle Condition Discount

- Log into your portal account to see the Online Forms. From the selection click on “Application for Vehicle Condition Discount”. **You must attach supporting documents such as repair estimates and photographs.**

Application For Vehicle Condition Discount

Owner's Name

Federal ID or SS #

Daytime Phone #

EmailAddress

Mailing Address

Street

Tax Year for Appeal

Account #

Vehicle Information

License Plate #

Appeal Information

Body Damage?

Yes

No

Mechanical Problems?

Yes

No

Is the item inoperative or junked?

Yes

No

Is the item still title at DMV/DWR?

Yes

No

Briefly describe the condition of the item and the reasons for appealing the current assessment. Attach all necessary documentation detailing the condition of the vehicle, repair estimates, and photographs. Attach additional sheets, if necessary. **The appeal will be denied if supporting documentation is not included with the appeal form.**

Attachments [Add](#) [Remove](#)

Instructions

The COMMISSIONER of the REVENUE's duty is to ensure fair, equitable and uniform assessments. Property assessments are based on the guides developed by N.A.D.A. Official Guides. The Commissioner of the Revenue may adjust an assessment in accordance with the Code of Virginia 58.1-3980 Application to commissioner of the revenue or other official for correction.

All appeals will be reviewed and responded to within five (5) working days.

1. Review the form carefully and answer all questions.
2. The condition of the item must be below average and must not be due to "normal" wear and tear on the item based on the item model year.
3. If the condition of the item is not restored, then a condition certification form must be filed each year with the Commissioner of the Revenue.
4. If the appeal form is filed within ten (10) working days of the due date of any personal property billing, then the entire bill must be paid by the due date to avoid penalty and interest. Any adjustment made to the bill will result in a credit on the account.

While every effort is made to establish correct assessments, taxpayers who believe they have been incorrectly assessed are entitled to file a petition for correction in Chesterfield County Circuit Court. Taxpayers have three years from the end of the tax year in which an assessment was made, to appeal the assessment and ask for a correction.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

[Submit](#)

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Boat Registration Form

- Log into your portal account to see the Online Forms. From the selection click on “Boat Registration Form”. This will be used when you purchase a new boat or moved the boat from another locality to Chesterfield.

Boat Registration Form

Account #

Name

| | | | |
|------|-------|--------|--------|
| Last | First | Middle | Suffix |
|------|-------|--------|--------|

Address

Street

| | | |
|------|---|-----|
| City | Virginia ▼ | Zip |
|------|---|-----|

Boat Information

| | | |
|-------------|-------------|--------------|
| Year | Make | Model |
| | | |

| | | |
|----------------|--------------------|----------------------|
| Hull ID | Length Feet | Length Inches |
| | | |

| | |
|-------------------------|---|
| Date of Purchase | Date Boat was brought into Chesterfield County |
| | |

Motor Information

| | | | |
|-------------|---------------------|------------------|-------------------|
| Year | Manufacturer | Fuel Type | Horsepower |
| | | | |

Model Name and Number

(if more than one motor list both) (Ex. Optimax-115ELPT) NOT the serial #

| | |
|-------------|----------------|
| Date | Phone # |
| | |

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

All account information shown are accounts created by staff. No existing citizen information is used

Boat Condition Certification

- Log into your portal account to see the Online Forms. From the selection click on “Boat Condition Certification”.

Boat Condition Certification

Account #

I, , do declare as owner, or agent for the owner, of the boat and/or motor listed below

- I have no plans in the future to repair and/or restore this boat and/or motor
- I declare that this boat and/or motor is in the same general condition as when I submitted paperwork supporting the condition of the boat and/or motor.

Boat Information

| | | |
|------|--------------|------|
| Year | Make & Model | VA # |
|------|--------------|------|

Motor Information

| | |
|------|--------------|
| Year | Make & Model |
|------|--------------|

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 boat and/or motor 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 boat is enhanced due to repair, restoration, etc.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

Military Spouses Residency Relief Form

- Log into your portal account to see the Online Forms. From the selection click on “Military Spouses Residency Relief”.

Military Spouses Residency Relief

Account #

Certification of Legal Residence (Domicile)

This certificate must be filed by any non-military spouse claiming exemption from taxation of personal property in Virginia under the Military Spouses Residency Relief Act.

Non-military Spouse Information

Name

| | | | |
|------|-------|--------|--------|
| Last | First | Middle | Suffix |
|------|-------|--------|--------|

Social Security Number:

State of Legal Residence

Legal Residence Address

| | | |
|------|----------|-----|
| City | Virginia | Zip |
|------|----------|-----|

Are you employed?

Yes

No

Service Member's Information

Name

| | | | |
|------|-------|--------|--------|
| Last | First | Middle | Suffix |
|------|-------|--------|--------|

Social Security Number:

Virginia Address (where you both reside currently)

| | | |
|------|----------|-----|
| City | Virginia | Zip |
|------|----------|-----|

All account information shown are accounts created by staff. No existing citizen information is used

- You must provide: Copy of non-military spouse's Military ID, AND Copy of military service members Leave and Earning Statement(LES) from January of current tax year OR Current Form DD 2058(State of Legal Residence Certificate)

Required Documentation: Copy of non-military spouse's Military ID, AND Copy of military service member's Leave and Earnings Statement from January of current tax year OR Current Form DD 2058 (State of Legal Residence Certificate)

Copy of non-military spouse's Military ID

No file chosen

Copy of military service member's Leave and Earnings Statement from January of current tax year

No file chosen

Current Form DD 2058 (State of Legal Residence Certificate)

No file chosen

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 understand that I need to certify for this exemption each tax year before March 1st to avoid receiving a personal property tax bill(s). I declare that I have carefully reviewed all information contained in this document, and I certify that it is true and correct. Also, I have enclosed all of the required documentation listed above.

Phone #

Email Address

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Vehicle Usage Certification

- Log into your portal account to see the Online Forms. From the selection click on “Vehicle Usage Certification”.
- This form is used when a personal use vehicle becomes a business use vehicle. Or business use vehicle becomes a personal use vehicle.

Vehicle Usage Certification

Account #

The personal property tax relief program is very specific regarding what vehicles qualify for tax relief. Please read the following to determine if the vehicle qualifies.

Qualifying vehicles are those meeting **ALL** of the following criteria:

- Automobiles, motorcycles and pickup or panel trucks with a gross weight of 10,000 lbs. or less
- Owned, co-owned or leased by natural person who are responsible for the payment of the personal property tax
- Predominantly used for non-business purposes

Non-qualifying vehicles are those meeting **ANY** of the following criteria:

- Any vehicle with a gross weight of 10,001 lbs. or greater
- Owned, co-owned or leased in the name of a business
- More than 50% of the mileage for the year is for business purposes and is deducted for Federal Income Tax purposes or reimbursed by an employer
- More than 50% of the depreciation associated with the vehicle is deducted as a business expense
- The cost of the vehicle is expensed pursuant to §179 of the Internal Revenue Service Code (which by the definition requires 50% or greater business use); or
- Predominantly used for business purposes

I have read the above statement and declare that the vehicle described below

QUALIFIES

DOES NOT QUALIFY

Owner's Name

| | | | |
|------|-------|--------|--------|
| Last | First | Middle | Suffix |
|------|-------|--------|--------|

Vehicle Information

| | | | | |
|------|------|-------|-------|-----|
| Year | Make | Model | Title | Vin |
|------|------|-------|-------|-----|

Phone #

Email Address

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

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Vehicle Condition Certification

- Log into your portal account to see the Online Forms. From the selection click on “Vehicle Condition Certification”.
- This is for vehicles our office has visually inspected prior tax years and have approved for a deduction.

Vehicle Condition Certification

Account #

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.

Vehicle Information

| | | | | |
|------|------|-------|-------|-----|
| Year | Make | Model | Title | 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.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

Update Contact Information for Personal Property

- Log into your portal account to see the Online Forms. From the selection click on “Update Contact Information”.
- **You MUST update DMV for any name and address changes.**

Update Contact Information

Account #

Name

Last

First

Middle

Suffix

If you have changed your name, your new name must be updated in the DMV system before it can be changed in our system.

New Name (only if applicable)

Last

First

Middle

Suffix

Home #

Mobile #

Email Address

Change of Address:

Report a change of address directly to the Department of Motor Vehicles. DMV notifies our office of address changes, and our records are updated accordingly.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

Tax Relief Instructions

- Log into portal and click “Tax Relief” tab at the top. This will bring you to the multiple tax relief forms. Please select the application you wish to file.
- You must submit the requested documentation. If the documentation is not submitted with the form, it will be denied.
- Please read through the general information and requirements for eligibility on the form before submitting
- Should you have any questions contact our office at 804-748-1281 or COR@Chesterfield.gov

[Main](#) | [Personal Property](#) | [Tax Relief](#) | [Business E-Filing](#) | [Treasurer's Office](#) [PPVEH1 \(User Settings\)](#) | [Log Off](#)

Tax Relief

TAX RELIEF ONLINE FORMS

- [100% Disabled Veterans Motor Vehicle Application](#)
- [100% Disabled Veteran Real Estate Exemption Application](#)
- [Real Estate And Mobile Home Tax Relief for Elderly and Disabled Annual Certification](#)
- [Real Estate and Mobile Home Tax Relief for Elderly and Disabled Application & Instructions](#)
- [Surviving Spouse of a Member of the Armed Forces Killed in Action or Killed in the Line of Duty Real Estate Exemption Application](#)
- [Surviving Spouse of Certain Emergency Service Providers Killed in the Line of Duty Real Estate Exemption Application](#)
- [Widow/Widower of 100% Disabled Veteran Real Estate Exemption Application](#)

[Commissioner of the Revenue](#) | [Treasurer's Office](#) | [Accessibility](#) | [Privacy Policy](#) | [Site Map](#)

Veteran Exemptions

100% Disabled Veteran Motor Vehicle Exemption Application

- Log into your portal account and select Tax Relief to see the Online Forms. From the selection click on “100% Disabled Veterans Motor Vehicle Exemption Application”.
- Please complete all requested information including uploading required documents.
- This exemption is only granted for one(1) vehicle

100% Disabled Veteran Motor Vehicle Exemption Application

Account #

Veteran's Name

Social Security #

Phone #

Email Address

Address

Permanent disability effective date

determined by Department of Veterans Affairs:

*Code of Virginia § 58.1-3017. Disclosure of the social security number of a taxpayer is required for local tax administration purposes, including verification of the identity of any individual. Such numbers shall be regarded as confidential tax information.

Veteran's Primary Use Vehicle:

Is this a change from a previously exempted vehicle?

Yes

No

Benefits letter from the U.S. Department of Veterans Affairs

Copy of Driver's License

Copy of Marriage License

All account information shown are accounts created by staff. No existing citizen information is used

- Requirements for Eligibility

GENERAL INFORMATION & REQUIREMENTS FOR ELIGIBILITY

- The veteran must have a 100% service-connected, permanent, and total disability rated by the U.S. Department of Veteran Affairs.
- Exemption is granted on one (1) motor vehicle (passenger car or a pickup or panel truck) owned and used primarily by or for a veteran of the Armed Forces of the United States or the Virginia National Guard.
- Any such motor vehicle owned by a married person may qualify if either spouse is rated as 100% disabled.
- This exemption shall be applicable beginning on the date the motor vehicle is acquired or January 1, 2021, whichever is later, and shall not be applicable for any period of time prior to January 1, 2021.
- This exemption shall expire on the date of the disabled veteran's death and shall not be available for the surviving spouse.

INSTRUCTIONS

1. Attach a current benefits letter from the U.S. Department of Veterans Affairs stating you have a 100% service-connected, permanent, and total disability with the effective date that this was determined.
2. Attach a copy of your driver's license to verify your identification.
3. Attach a copy of your marriage license if you have a co-owner on your vehicle's title and registration. The co-owner must be your spouse to qualify for an exemption.

IMPORTANT

This application is subject to audit for up to three years after the year filed. Any corrections will be made by the Commissioner of the Revenue's office during this period, which can change exemption amounts for prior years. Applicants will remain liable for all taxes due until they are notified of their approval in writing by the Chesterfield County Commissioner of the Revenue.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

100% Disabled Veteran Real Estate Exemption Application

- Log into your portal account and select Tax Relief to see the Online Forms. From the selection click on “100% Disabled Veterans Motor Vehicle Exemption Application”.
- Please complete all requested information including uploading required documents.

100% Disabled Veteran Real Estate Exemption Application

Account #

Veteran's Name

 Last

 First

 Middle

 Suffix

*Social Security #

Phone #

Email

Permanent disability effective date
determined by Department of Veterans Affairs:

Property Address

 Street

 City

 Virginia

 Zip

List your spouse and any co-owners of the property

Add

Remove

*Code of Virginia § 58.1-3017. Disclosure of the social security number of a taxpayer is required for local tax administration purposes, including verification of the identity of any individual. Such numbers shall be regarded as confidential tax information.

Name(s) as shown on real estate tax bill

Please select appropriate option

- Real Estate
 Manufactured Home (Mobile Home)

Is this residence occupied by the Veteran as their sole dwelling?

- Yes
 No

Letter from the Department of Veterans Affairs stating you have a 100% service-connected, permanent, and total disability with the effective date that this was determined

 No file chosen

Virginia driver's license showing your primary address.

 No file chosen

Marriage License

 No file chosen

If the property is owned by a trust, attach copy of the trust

 No file chosen

All account information shown are accounts created by staff. No existing citizen information is used

- General Information & Requirements for Eligibility

GENERAL INFORMATION & REQUIREMENTS FOR ELIGIBILITY

- The veteran must have a 100% service-connected, permanent, and total disability rated by the U.S. Department of Veteran Affairs.
- Exemption is granted on the home and the land, not exceeding one acre, upon which that home is located.
- Property must be owned and occupied by the veteran as their primary residence.
- Property owned by co-owners, other than a spouse, will receive a prorated relief based on their ownership percentage.
- This exemption shall be applicable beginning on the date the primary residence is acquired or the date of disability rating or January 1, 2011, whichever is later, and shall not be applicable for any period of time prior to January 1, 2011.

INSTRUCTIONS

1. Attach a current benefits letter from the Department of Veterans Affairs stating you have a 100% service- connected, permanent, and total disability with the effective date that this was determined.
2. Attach a copy of your Virginia driver's license showing your primary address.
3. If you are married, attach a copy of your marriage license.
4. If the property is owned by a trust, attach a copy of the trust.
5. This application may be submitted by mail, email, or in-person by appointment only. A letter confirming receipt of your application will be mailed within three weeks of receipt.

IMPORTANT

This application is subject to audit for up to three years after the year filed. Any corrections will be made by the Commissioner of the Revenue's office during this period, which can change exemption amounts for prior years. Applicants will remain liable for all taxes due until they are notified of their approval in writing by the Chesterfield County Commissioner of the Revenue

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

Widow/Widower of 100% Disabled Veteran Real Estate Exemption Application

- Log into your portal account and select Tax Relief to see the Online Forms. From the selection click on “Surviving Spouse First Responder Application”.

Widow/Widower of 100% Disabled Veteran Real Estate Exemption Application

Account #

Widow or Widower's Name

*Social Security #

Phone #

Email

Name of Veteran

Date of Death

Total & Permanent effective date

Address of the veteran's primary residence, owned and occupied by the veteran, in the Commonwealth of Virginia at time of death?

Property Address

List all co-owners of the property, if any

Add

Remove

*Code of Virginia § 58.1-3017. Disclosure of the social security number of a taxpayer is required for local tax administration purposes, including verification of the identity of any individual. Such numbers shall be regarded as confidential tax information.

Name(s) as shown on real estate tax bill

Please select appropriate option

- Real Estate
 Manufactured Home (Mobile Home)

Is this residence occupied by the Widow/Widower as their sole dwelling?

- Yes
 No

- Please include the following supporting documents

All account information shown are accounts created by staff. No existing citizen information is used

- General Information and Requirements are listed below.

Supporting Documents

Letter from the Department of Veteran Affairs stating your spouse had a 100% service-connected, permanent, and total disability with the effective date that this was determined.

No file chosen

Virginia driver's license showing your primary address.

No file chosen

Spouse's Death Certificate

No file chosen

Marriage License

No file chosen

If the property is owned by a trust, attach copy of the trust

No file chosen

GENERAL INFORMATION & REQUIREMENTS FOR ELIGIBILITY

- The property must be owned and occupied by the widow/widower as their primary residence.
- You, the surviving spouse, has not remarried.
- Property owned by co-owners will received a prorated relief based on the ownership percentage.
- Exemption is granted on the home and the land, not exceeding on acre, upon which that home is located.
- The veteran must have been eligible for the real estate exemption program at time of death.
 - The veteran was alive January 1, 2011, and had a **100% service-connected, permanent, and total disability** rated by the U.S. Department of Veteran Affairs prior to or at time of death.
 - The veteran owned and occupied property in the Commonwealth of Virginia that was their primary residence at time of death.

INSTRUCTIONS

1. Attach a letter from the Department of Veterans Affairs stating your spouse had a 100% service-connected, permanent, and total disability with the effective date that this was determined.
2. Attach a copy of your Virginia driver's license showing your primary address.
3. Attach a copy of your spouse's death certificate.
4. Attach a copy of your marriage license.
5. If the property is owned by a trust, attach a copy of the trust.
6. This application may be submitted by mail, email, or in-person by appointment only. A letter confirming receipt of your application will be mailed within three weeks of receipt.

IMPORTANT

This application is subject to audit for up to three years after the year filed. Any corrections will be made by the Commissioner of the Revenue's office during this period, which can change exemption amounts for prior years. Applicants will remain liable for all taxes due until they are notified of their approval in writing by the Chesterfield County Commissioner of the Revenue.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Tax Relief for the Elderly and Disabled

Real Estate and Mobile Home Tax Relief for Elderly and Disabled Annual Certification

- Log into your portal account and select Tax Relief to see the Online Forms. From the selection click on “Real Estate and Mobile Home Tax Relief for Elderly and Disabled Annual Certification”.

Real Estate And Mobile Home Tax Relief for Elderly and Disabled Annual Certification

FILING DEADLINE IS APRIL 1, 2023

Account #

Parcel #

Applicant's Name

Last

First

Middle

Suffix

Address

Street

City

Virginia

Zip

Phone #

Attachments

Add

Remove

The Chesterfield County ordinance for the Real Estate Tax Relief program provides that once a taxpayer has been determined eligible for exemption that an application must be filed once every three years. A certification must be filed in each of the **two intervening years**. The Commissioner may make any other reasonably necessary inquiries of persons seeking an exemption.

Review your Income and Assets information:

- If **NO** significant change
 - Sign certification and return to the Commissioner of the Revenue's office
- If there **IS** a significant change in Income, Assets and/or Ownership:
 - Provide your Tax Return, 1099's and other income statements
 - Provide proof of increase or decrease in assets
 - Return proof to the Commissioner of the Revenue's office
 - Report any Deed changes

A letter of hardship with explanation of the late filing must be provided with all submitted applications/certifications after the April 1st deadline for returning applicants.

A letter confirming receipt of your certification will be mailed within three weeks of receipt.

Important: Applicants will remain liable for all taxes due until they are notified of their approval in writing by the Chesterfield County Commissioner of the Revenue's office.

I do hereby certify that my income and net worth have not changed significantly since my last application for Real Estate Tax Relief was filed with the Commissioner of the Revenue and that the property is my primary residence.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

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Real Estate and Mobile Home Tax Relief Application for Elderly and Disabled & Instructions

- Log into your portal account and select Tax Relief to see the Online Forms. From the selection click on “Real Estate and Mobile Home Tax Relief Application for Elderly and Disabled & Instructions”.
- Make sure you thoroughly read over the instructions and provide the required documents.

Real Estate and Mobile Home Tax Relief Application for Elderly and Disabled & Instructions

Account #

GENERAL INFORMATION

The Chesterfield County ordinance for the Real Estate Tax Relief program provides that once a taxpayer has been determined eligible for exemption that an application must be filed once every three years. A certification must be filed in each of the **two intervening years**. The Commissioner may make any other reasonably necessary inquiries of persons seeking an exemption.

First-time applicants applying as permanently and totally disabled and any relative(s) residing in the dwelling who are permanently and totally disabled must provide certification and the date the disability began from one of the sources listed below:

- Certification by the Social Security Administration, which states the date the applicant and/or relatives were deemed disabled (SSA Notice of Award).
- Certification by the Veterans Administration or Railroad Retirement Board.

If such person is not eligible for certification by any of these agencies listed above, attach sworn affidavits by two medical doctors licensed to practice medicine in the Commonwealth of Virginia, to the effect that such person is permanently and totally disabled, the nature of the disability, and the date the person became permanently and totally disabled.

This application must be filed no later than **April 1, 2023**. If hardship conditions exist which, through no fault of the applicant, prohibit them from applying by the due date, the due date may be extended. A letter of hardship with explanation of the late filing must be provided with all applications submitted after the April 1st deadline for returning applicants.

In accordance with the **Code of Virginia §58.1-3215 and Chesterfield County Code 9-27**, if the tax exemption is given on the property and there is a change affecting the income, financial worth, ownership of the property or other factors occurring during the taxable year, the applicant shall receive the exemption for the portion of the year in which they qualify and lose the exemption only for the remainder of the year.

If a new home is purchased, the applicant will be required to complete a full application and provide supporting documentation before the tax relief is transferred to the new home.

The first and second half payments (where applicable) must be received by June 5, 2023, and December 5, 2023, respectively, to avoid the 10% late payment penalty. Please notify us of any changes occurring during the year by calling (804) 748-1281.

Note: Tax relief is not available to the executor of an estate or heirs of an applicant.

REQUIREMENTS FOR ELIGIBILITY

- The applicant(s) occupying the dwelling and holding title must be at least 65 years of age (born 1957) or totally and permanently disabled as of December 31, 2022.
- For those under 65 years of age, proof of disability is required.
- The property must be occupied as the sole dwelling of the applicant(s). A dwelling jointly held by husband and wife may qualify if either spouse is 65 or older or is totally and permanently disabled.
- For property owned by other than an applicant and spouse, tax relief would be prorated based on the percent of ownership held by qualifying applicant(s). If the deed for the property reflects less than 100% ownership by qualifying applicants, then the tax relief will be adjusted to reflect this percentage.
- The property must be owned and occupied year-round except when the owner(s) temporarily reside(s) in a hospital or nursing home for physical or mental care. The dwelling may not be used or leased to others for consideration.
- Relief is granted on the home and the land, not exceeding one acre, upon which that home is located.
- Tax relief shall be prorated based upon the end date of eligibility.
- You must meet all eligibility criteria to qualify.

All account information shown are accounts created by staff. No existing citizen information is used

- Income and net worth must be within a certain range to qualify for relief. See below.

INCOME AND NET WORTH

The combined total income for calendar year 2022 from all sources shall not exceed \$55,200. The income of all residents of the dwelling must be reported in the total income with the exception of persons not related to the owner(s). A \$10,000 deduction will be allowed for the income of each relative other than the spouse/co-owner.

The combined total net worth of the applicant, spouse, co-owner(s), and their spouse(s) living in the dwelling, shall not exceed \$350,000 (excluding the value of the dwelling and up to ten acres of land on which the dwelling is situated) as of December 31, 2022.

| Percentage of Relief | Gross Income Limits | Net Worth Limit |
|----------------------|---------------------|-----------------|
| 100% | Up to \$36,000 | \$350,000 |
| 60% | \$36,301 - \$45,000 | \$350,000 |
| 35% | \$45,001 - \$60,000 | \$350,000 |

IMPORTANT - the amount of tax relief awarded to qualifying applicants will be based on the percentage of relief (as shown above), up to a maximum tax amount of \$3,000.

INSTRUCTIONS

- Please complete this application with the same accuracy as you would your income tax return.
- Review the application to make sure all parts are complete and verify all supporting documents are included.
- Enclose a copy of the death certificate for any spouse/co-owner who is deceased (unless previously supplied with a prior application).
- If you are not over 65 years of age, you must provide disability verification. This requirement does not apply to returning applicants who have provided the required disability documentation in a previous year.
- Submit copies of supporting income and asset documentation as of December 31, 2022, with your initial filing.
- Please provide a tax return copy (if required to file) for you, your spouse and any relatives living in the dwelling.
- If you are applying for the first time, please attach a copy of your Driver's License or DMV Issued ID Card as proof of age and identification.
- Return the completed 2023 tax relief application and supporting documentation postmarked by April 1, 2023.
- This application may be submitted by mail, email, or in-person by appointment only. A letter confirming receipt of your application will be mailed within three weeks of receipt.

IMPORTANT

This application is subject to audit for up to three years after the year filed. Any corrections will be made by the Commissioner of the Revenue's office during this period, which can change exemption amounts for prior years.

Applicants will remain liable for all taxes due until they are notified of their approval in writing by the Chesterfield County Commissioner of the Revenue's office.

- Filing Deadline for re-certification is due April 1st.
- First-time applicants and cases of hardship will be considered through December 31st each year.

FILING DEADLINE: April 1, 2023

First-time applicants and cases of hardship will be considered through December 31, 2023

Applicant (Property Owner)

| | | | |
|------|-------|--------|--------|
| Last | First | Middle | Suffix |
|------|-------|--------|--------|

| | | |
|----------------------|----------------------|----------------------|
| Social Security # | Phone # | Birth Date |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Property Address

| | | |
|--------|----------|-----|
| Street | | |
| City | Virginia | Zip |

List your spouse and any co-owners of the property [Add](#) [Remove](#)

*Code of Virginia § 58.1-3017. Disclosure of the social security number of a taxpayer is required for local tax administration purposes, including verification of the identity of any individual. Such numbers shall be regarded as confidential tax information.

Name(s) as shown on real estate tax bill

Please check the appropriate box

- Real Estate
 Manufactured Home (Mobile Home)

Is this residence occupied by the applicant(s) as their sole dwelling?

- Yes
 No

Are there any relatives, other than your spouse or co-owner(s), living in the home? [Add](#) [Remove](#)

- Total income must be provided for consideration.
- Copies of proof of all income must be furnished.
- **If your income exceeds \$55,200 you will not qualify for tax relief.**

TOTAL INCOME

Enter the total income for calendar year 2022 from all sources of the applicant, spouse, co-owners(s) and their spouse(s), and all other relatives living in the dwelling. List each relative's income separately. Use additional sheets if necessary. Where there is nothing to report, leave blank.

COPIES OF PROOF OF ALL INCOME MUST BE FURNISHED

Note: Please attach a copy of your federal income tax return (if required to file).

Filling Federal Income on an annual basis?

Yes

No

| Total Income on an annual basis as of December 31, 2022 | Documentation Required | Applicant / Owner | Spouse And/Or Co- Owner(s) Living in the Dwelling | Any Owner's Relatives Living in the Dwelling |
|--|-----------------------------------|-------------------|---|--|
| Wages, Salaries, etc. | W-2 | 0 | 0 | 0 |
| Pensions or Annuities (Taxable Amount) | 1099-R | 0 | 0 | 0 |
| Social Security (Gross Amount - Box 5) | SSA-1099 | 0 | 0 | 0 |
| Taxable Interest & Dividends | 1099-INT/DIV | 0 | 0 | 0 |
| IRA Distributions (Taxable Amount) | 1099-R | 0 | 0 | 0 |
| Capital Gains | Schedule D | 0 | 0 | 0 |
| Rental Real Estate, Royalties, Trusts, Partnerships, S Corporations, etc. | Schedule E/K1 | 0 | 0 | 0 |
| Unemployment Compensation | 1099-G | 0 | 0 | 0 |
| Supplemental Security Income (SSI) | Statement from Social Security | 0 | 0 | 0 |
| Alimony Received | Divorce Decree | 0 | 0 | 0 |
| Business Income | Schedule C | 0 | 0 | 0 |
| Other Income (List Type and Amount) | Provide Proof | 0 | 0 | 0 |
| Sub-Total | | 0 | 0 | 0 |
| Deduction for each Relative's Income | | | | (-\$10,000) * |
| Total Income | | 0 | 0 | 0 |

**Or amount from sub-total, whichever is lower*

Total Combined Income of Applicant, Spouse/Co-Owner(s) and Relatives: \$

0

**** If your income exceeds \$55,200 you will not qualify for the tax relief****

All account information shown are accounts created by staff. No existing citizen information is used

- Total Net Worth
- Copies of all assets must be furnished
- **If your assets exceed \$350,000 you will not qualify for tax relief.**

TOTAL NET WORTH

Please complete the following statement of net financial worth as of **December 31, 2022**, for applicant, spouse, co-owner(s) and their spouse(s). Exclude the value of the dwelling and up to ten acres of land upon which the dwelling is situated. Include any additional subdivided lots as assets. Use additional sheets if necessary. **Where there is nothing to report, leave blank.**

COPIES OF PROOF OF ALL ASSETS MUST BE FURNISHED

| Value of Assets as of December 31, 2022 | Documentation Required | Applicant / Owner | Spouse and/or Co-Owner(s) Living in the Dwelling |
|--|--|-------------------|--|
| Real Estate (in Chesterfield other than residence) | 2022 Assessment | 0 | 0 |
| Real Estate (outside of Chesterfield) | | 0 | 0 |
| Personal Property (both in & out of Chesterfield) | 2022 Tax Bill | 0 | 0 |
| Checking Account(s) | Complete Bank Statement(s) as of 12/31/2022 | 0 | 0 |
| Savings and/or Money Market Account(s) | | 0 | 0 |
| Certificate(s) of Deposit (CDs) | | 0 | 0 |
| Stocks, Investments, Savings Bonds | Complete Financial Account Statement(s) as of 12/31/2022 | 0 | 0 |
| Life Insurance (Cash Value) | | 0 | 0 |
| IRA(s), 401(k) Plans, Annuities, Retirement and/or Thrift Account(s) | | 0 | 0 |
| Trust(s) | | 0 | 0 |
| Other Assets (List Type and Amount) | Provide Proof | 0 | 0 |
| Total Net Worth | | 0 | 0 |

Total Combined Net Worth of Applicant, Spouse and/or Co-Owner(s): \$

0

List the address and location of all real estate other than the residence, including any additional lots

Add

Remove

****If your assets exceed \$350,000 you will not qualify for tax relief****

- Please attach the below required documents.

Please attach required documents

Certification by the Social Security Administration

[Choose File](#) No file chosen

Certification by the Veterans Administration or Railroad Retirement Board

[Choose File](#) No file chosen

Federal Income Tax Return

[Choose File](#) No file chosen

W-2

Add

Remove

1099-R

Add

Remove

1099-G

Add

Remove

1099-INT/DIV

Add

Remove

SSA-1099

Add

Remove

Schedule D

Add

Remove

Schedule E/K1

Add

Remove

Statement from Social Security

Add

Remove

All account information shown are accounts created by staff. No existing citizen information is used

- Required documents continued.
- Once all documents are uploaded you will then electronically sign the document and click “Submit”

Divorce Decree

Add

Remove

2022 Assessment

Add

Remove

Personal Property Tax Bill

Add

Remove

Complete Bank Statement(s)

Add

Remove

Complete Financial Account Statement(s)

Add

Remove

Other Documents

Add

Remove

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Submit

Surviving Spouse Exemptions

Surviving Spouse Armed Forces Application

- Log into your portal account and select Tax Relief to see the Online Forms. From the selection click on “Surviving Spouse Armed Forces Application”.

Surviving Spouse Armed Forces Application

Surviving Spouse's Name

***Social Security #**

Phone #

Name of Member of the Armed Forces:

Date of Death

(Please check the appropriate)

Killed in Action

Yes

No

Died of Wounds Received in Action

Yes

No

Killed in the Line of Duty

Yes

No

Co-owner(s). List all co-owners of the property, if any. [Add](#) [Remove](#)

*Code of Virginia § 58.1-3017. Disclosure of the social security number of a taxpayer is required for local tax administration purposes, including verification of the identity of any individual. Such numbers shall be regarded as confidential tax information.

Name(s) as shown on real estate tax bill

Property Address:

Virginia ▼

(Please check the appropriate)

Real Estate

Manufactured Home (Mobile Home)

Letter from the United States Department of Defense

Copy of your spouse's death certificate

Copy of your marriage license.

Copy of your Virginia driver's license

Account #

All account information shown are accounts created by staff. No existing citizen information is used

- Attach all necessary documentation.

If the property is owned by a trust, attach copy of the trust

 No file chosen

I do hereby declare that the information included in this application, is to the best of my knowledge and belief, complete and true in all respects and that I am the owner of the property listed and occupy it as my sole residence.

GENERAL INFORMATION & REQUIREMENTS FOR ELIGIBILITY

- Your spouse, a member of the armed forces of the United States, was killed in action, died of wounds received in action or was killed in the line of duty.
- Property must be owned and occupied by the surviving spouse as their permanent residence.
- Property owned by co-owners will receive a prorated relief based on their ownership percentage.
- Exemption is granted on the home and the land, not exceeding one acre, upon which that home is located, and will be based on the average assessment for Chesterfield County.
- You have not remarried.

INSTRUCTIONS

1. Attach a letter from the United States Department of Defense determining your spouse, a member of the armed forces of the United States, was killed in action, died of wounds received in action, or was killed in the line of duty.
2. Attach a copy of your spouse's death certificate.
3. Attach a copy of your marriage license.
4. Attach a copy of your Virginia driver's license showing your primary address.
5. If the property is owned by a trust, attach a copy of the trust.
6. This application may be submitted by mail, email, or in-person by **appointment only**. A letter confirming receipt of your application will be mailed within three weeks of receipt.

IMPORTANT

This application is subject to audit for up to three years after the year filed. Any corrections will be made by the Commissioner of the Revenue's office during this period, which can change exemption amounts for prior years. Applicants will remain liable for all taxes due until they are notified of their approval in writing by the Chesterfield County Commissioner of the Revenue.

Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.

Surviving Spouse First Responder Application

- Log into your portal account and select Tax Relief to see the Online Forms. From the selection click on “Surviving Spouse First Responder Application”.

Surviving Spouse First Responder Application

Account #

Surviving Spouse's Name

Last

First

Middle

Suffix

*Social Security #

Phone #

Email Address

Name of First Responder:

Last

First

Middle

Suffix

Date of Death

Co-owner(s). List all co-owners of the property, if any.

Add

Remove

*Code of Virginia § 58.1-3017. Disclosure of the social security number of a taxpayer is required for local tax administration purposes, including verification of the identity of any individual. Such numbers shall be regarded as confidential tax information.

Name(s) as shown on real estate tax bill

Property Address:

Street

City

Virginia

Zip

(Please check the appropriate)
 Real Estate

 Manufactured Home (Mobile Home)

Certification from the Comptroller

Choose File

No file chosen

Copy of your spouse's death certificate

Choose File

No file chosen

Copy of your marriage license.

Choose File

No file chosen

Copy of your Virginia driver's license

Choose File

No file chosen

If the property is owned by a trust, attach copy of the trust

Choose File

No file chosen

All account information shown are accounts created by staff. No existing citizen information is used

- **General Information and Requirements for Eligibility**

I do hereby declare that the information included in this application, is to the best of my knowledge and belief, complete and true in all respects and that I am the owner of the property listed and occupy it as my sole residence.

GENERAL INFORMATION & REQUIREMENTS FOR ELIGIBILITY

- Your spouse, an emergency service provider, was killed in the line of duty.
- Property must be owned and occupied by the surviving spouse as their permanent residence.
- Property owned by co-owners will receive a prorated relief based on their ownership percentage.
- Exemption is granted on the home and the land, not exceeding one acre, upon which that home is located, and will be based on the average assessment for Chesterfield County.
- You have not remarried.

INSTRUCTIONS

1. Attach certification from the Comptroller, prior to July 1, 2017, or the Virginia Retirement System, on or after July 1, 2017, determining your spouse was killed in the line of duty.
2. Attach a copy of your spouse's death certificate.
3. Attach a copy of your marriage license.
4. Attach a copy of your Virginia driver's license showing your primary address.
5. If the property is owned by a trust, attach a copy of the trust.
6. This application may be submitted by mail, email, or in-person by **appointment only**. A letter confirming receipt of your application will be mailed within three weeks of receipt.

IMPORTANT

This application is subject to audit for up to three years after the year filed. Any corrections will be made by the Commissioner of the Revenue's office during this period, which can change exemption amounts for prior years.

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Signature must be the taxpayer or a person legally authorized to represent the taxpayer. By typing your name below, you are signing this form electronically, understanding that your electronic signature is equivalent to your manual signature. By signing you declare that the foregoing statements, figures, and information are true, full, and correct to the best of my knowledge.