



Ray A. Conner
 Commissioner of the Revenue
 Post Office Box 15285
 Chesapeake, Virginia 23328
 Phone (757) 382-6730 FAX (757) 382-8369

Request For Refund or Prorated Assessment

Name: _____ SS#: _____
 Street Address: _____
 City _____ State _____ Zip Code _____
 Day Telephone _____ Evening Telephone _____ Bill #: _____
 Vehicle Year: _____ Make: _____ Model: _____ Decal #: _____
 I.D.#: _____ Title #: _____ State License #: _____

- 1) I moved into Chesapeake with the above vehicle on (Date) _____ from
 (Locality) _____, and previously paid personal property
 taxes in the amount of _____ to that locality for the year of _____.
- 2) I moved out of Chesapeake with the above vehicle on (Date) _____ and do not intend
 to return this year.

NEW ADDRESS:

**IF YOU HAVE MOVED OUT OF VIRGINIA, A COPY OF YOUR NEW STATE VEHICLE REGISTRATION
 MUST BE PROVIDED. FAILURE TO PROVIDE THIS INFORMATION WILL DELAY ANY POTENTIAL
 REFUND OR PRORATION OF YOUR TAX BILL.**

- 3) I sold or otherwise disposed of the above vehicle on (Date) _____ to
 (Name) _____ (Address) _____

I hereby certify that the above information is correct.

 Signature (Required)

(Date)

NOTICE

The City of Chesapeake prorates personal property taxes on motor vehicles and trailers on a monthly basis.

If you have sold or otherwise disposed of a vehicle this year, or if you have permanently moved into or out of Chesapeake, please certify on the above form. This information will determine if you are entitled to a prorated assessment and/or refund.

If you have any questions regarding prorations please contact the Office of the Commissioner of the Revenue at (757) 382-6730. Our regular office hours are Monday through Friday 8:00 AM to 5:00 PM. Thank you for your cooperation.

Please note: Your SIGNATURE is REQUIRED on this form.