

Widow(er) Of Disabled Veteran - You May Qualify:

1. Your veteran must have met one of the following disability requirements:

<input type="checkbox"/>	Acquired in connection with such service a disability from paraplegia or permanent paralysis of both legs and lower part of the body resulting from traumatic injury or disease to the spinal cord or brain, or from legal blindness, or from loss or loss of use of two (2) or more limbs from any service-connected cause;
<input type="checkbox"/>	Acquired one hundred percent (100%) permanent total disability, as determined by the United States veterans' administration, and such disability resulting from having served as a prisoner of war; or
<input type="checkbox"/>	Acquired service-connected permanent and total disability or disabilities, as determined by the United States department of veterans' affairs.

2. Or their death resulted from one of these:

<input type="checkbox"/>	Property tax relief shall also be extended to the surviving spouse of a veteran whose death results from a service-connected, combat-related cause, as determined by the United States veterans' administration;
<input type="checkbox"/>	Property tax relief shall also be extended to the surviving spouse of a soldier whose death results from being deployed, away from any home base of training and in support of combat or peace operations.

3. Additional Requirements

<input type="checkbox"/>	Your veteran was not dishonorably discharged from any armed service.
<input type="checkbox"/>	You must have been married to your veteran at the time of their death and not have remarried.
<input type="checkbox"/>	Your name is on the deed, or you can prove ownership by another means.
<input type="checkbox"/>	You live on the property as your primary residence in 2025. (can't apply for 2 properties)
<input type="checkbox"/>	Your 2025 property taxes are paid in full or will be paid in full by your mortgage company.
<input type="checkbox"/>	You must complete an F-16S consent form for the release of information from the VA.
<input type="checkbox"/>	Please bring your veteran's death certificate.
<input type="checkbox"/>	Please bring your valid driver's license or state issued ID.
<input type="checkbox"/>	If the name on your application is different from the name the Social Security office has for you, the state will need you to explain. The phrase "are the same person" isn't accepted.
<input type="checkbox"/>	We must have a reliable phone number and/or an alternate contact number. If you cannot be reached, your application may not be approved.
<input type="checkbox"/>	If the address on your ID is different from the address of the property you are applying for tax relief on, then documentation proving residency is required. (examples on page 7)
<input type="checkbox"/>	If your house is in a trust, provide the section of the trust specifying the name of the trust as well as the name of grantor/settlor/trustor. We cannot process your app without this.
<input type="checkbox"/>	If your property is a mobile home, provide mobile home ownership documentation such as the bill of sale, or title in your name. We cannot process your app without this.
<input type="checkbox"/>	2025 Tax Relief Program refunds up to \$487 of your 2025 Knox County property taxes. Relief cannot be applied for retroactively. (the amount of tax relief changes year to year)
<input type="checkbox"/>	Your signed application, all required documentation and full payment of property taxes must be received no later than April 5, 2026. (Interest applies starting March 1 st .)
	If you need help filling out your application, please visit any of our locations, no appointment is necessary. All required copies can be made for you at no cost to you.

Important Notes:

Please fill out only section 1 of the consent form below (F-16S).
Filling out any other section will void your form.

This form must be signed and includes your veteran's name and your veteran's full social security number as well as your name and your full social security number. Hard to read numbers can cause your form to be denied.

Please fill out only section 1 of the consent form below (F-16S).



**PROPERTY TAX RELIEF PROGRAM
 CONSENT FOR RELEASE OF INFORMATION
 FROM THE DEPARTMENT OF VETERANS AFFAIRS**

**2025
 F-16S**

1. To be completed by jurisdiction and applicant.

Veteran's Last Name	Veteran's First Name	Veteran's Middle Initial	Veteran's Social Security #
Applicant's Last Name	Applicant's First Name	Applicant's Middle Initial	Applicant's Social Security #

**Submit death certificate and personal ID (Social Security card or driver's license).*

X _____ **Signature (I certify that I have not remarried since my spouse's death.)** _____ **Date**

I authorize the Department of Veterans Affairs to release all information necessary to ascertain my status according to Tenn. Code Ann. § 67-5-704, including my percentage of disability and income, and to forward this information to the Property Tax Relief Program.

2. To be completed by Tax Relief office.

Application #	Date 1st Transmitted to VA	Resubmission Date and Reason for Resubmission
		1 st
		2 nd

3. To be completed by the Nashville, TN Veterans Affairs Regional Office ONLY.

Has this veteran ever been dishonorably discharged? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Review of records from this office confirms the named veteran meets the following criteria defined in Tenn. Code Ann. § 67-5-704: (Check ALL that apply)	
	Acquired in connection with such service a disability from paraplegia or permanent paralysis of both legs and lower part of the body resulting from traumatic injury or disease to the spinal cord or brain, or from legal blindness, or from loss or loss of use of two (2) or more limbs from any service-connected cause;
	Acquired one hundred percent (100%) permanent total disability, as determined by the United States veterans' administration, and such disability resulting from having served as a prisoner of war; or
	Acquired service-connected permanent and total disability or disabilities, as determined by the United States department of veterans' affairs.
	Property tax relief shall also be extended to the surviving spouse of a veteran whose death results from a service-connected, combat-related cause, as determined by the United States veterans' administration;
	Property tax relief shall also be extended to the surviving spouse of a soldier whose death results from being deployed, away from any home base of training and in support of combat or peace operations;
Effective date of above rating:	Rating Date:
OR	
	A review of records from this office confirms the named veteran does not meet the criteria in Tenn. Code Ann. § 67-5-704. Record indicates the veteran receives VA benefits based on the following: 2024 Yearly Income:
IF VETERAN <u>DOES NOT</u> MEET CRITERIA IN TENN. CODE ANN. § 67-5-704, PLEASE COMPLETE SECTION BELOW.	
Disability information for Veterans NOT meeting criteria in Tenn. Code Ann. § 67-5-704 above: Review of records from this office confirms the surviving spouse of named veteran is in receipt of <u>Annual VA</u> nonservice-connected pension benefits. Please provide 2024 calendar year income:	

_____ VA Representative	_____ Title	_____ Date
VA Comments:		

Important Notes:

Please fill out and sign the application below.

(2025 DV Application)

Widow(er)s of Disabled Veterans are not required to fill out income or co-owner information. All other information must be filled out.

This application cannot be submitted electronically or by email. Please either mail us the application and requested documentation or take it to one of the locations listed here:

Halls - By Rual King
7328 Norris Freeway
Knoxville, TN 37918
Monday - Friday 8 a.m.- 4:30 p.m.
(865) 215-3461

Cedar Bluff
9000 Executive Park Dr.
Suite A301
Knoxville, TN 37923
Monday - Friday 8 a.m.- 4:30 p.m.
(865) 215-8555

East Town Crossing - By Home Depot
4734 Centerline Drive
Knoxville, TN 37917
Monday - Friday 9 a.m.- 5 p.m.
(865) 258-3516

City County Building (Pay to Park)
400 Main Street
4th Floor
Knoxville, TN 37902
Monday - Friday 8 a.m.- 4:30 p.m.
(865) 215-2305

Chapman Plaza - By Tennova Health
7339 Chapman Highway
Knoxville, TN 37920
Monday - Friday 8 a.m.- 4:30 p.m.
(865) 577-3680

Mail: Knox County Trustee
P.O. Box 70, Knoxville, TN 37901

Please fill out and sign the application below.

(2025 DV Application)

2025 DV APPLICATION

State of Tennessee Property Tax Relief Program

APPLICATION DATE

CLASSIFICATION

Elderly Disabled Disabled Veteran Widow(er) of Disabled Veteran

JURISDICTION

NAME

DATE TAXES PAID

RECEIPT NUMBER

MORTGAGE CO PAID?

ISSUE PAYMENT TO

COUNTY

 YES NO APPLICANT COUNTY

CITY

 YES NO APPLICANT CITY

Tax payment late due to mobile home park or mortgage company YES NO

APPLICANT

Last Name

First Name

MI

SSN

Gender

MALE

FEMALE

DOB

APPLICANT'S INCOME

(Only Elderly & Disabled Homeowners)

NO INCOME IN 2024

INCOME LIMIT - \$37,530

SSA BENEFITS

SSI BENEFITS

RETIREMENT / PENSION

VETERAN'S BENEFITS

WORKER'S COMP

WAGES & SALARIES

DIVIDENDS & INTEREST

OTHER INCOME

RENTAL INCOME

INCOME LOSS (-)

TOTAL 2024 INCOME

PROPERTY

Parcel ID

Address

City

TN Zip

USPS does not forward Tax Relief checks. If relocated, provide mailing address and reason

MAILING

My mailing address is:

PERMANENT

TEMPORARY

PROVIDE REASON IN COMMENTS

Mailing Address,

if different than property address

City

State

Zip

County

CONTACT INFO.

Applicant Phone

Applicant Email

Alternate Contact Name

Alternate Contact Phone

Alternate Contact Email

PROPERTY TYPE:

HOME

MOBILE HOME

MOBILE HOME ON SOMEONE ELSE'S LAND

COMMERCIAL

HOME ON PARCEL WITH MULTIPLE RESIDENCES

Do you live on this property? YES NO

Are you relocated? YES NO

Month and Year of Relocation

Reason for Relocation

Is your property rented?

YES NO

Did you receive tax relief on another property in Tennessee or property tax exemption in another state in the current tax year?

YES

NO

➔ If YES, applicant is ineligible for tax relief.

OTHER PARTIES

Select one type:

- CO-OWNER**
- SPOUSE**
- RESIDENT REMAINDER**

Is the property co-owned? YES NO

Is the applicant married? YES NO

Is there a life estate? YES NO

If YES, is the remainder living on the property? YES NO

Last Name

First Name MI

SSN - -

Gender MALE FEMALE

DOB / /

FOR ADDITIONAL PARTIES, COMPLETE AND TRANSMIT F-10 FORM.

DECEASED OWNER

Name Year Deceased

Relationship: SPOUSE PARENT SIBLING OTHER

CERTIFICATION BY COLLECTING OFFICIAL

I assert that I have exercised reasonable care and am satisfied that the applicant understood the following:

- (a) all changes of spouse and owners were to be listed; and
- (b) all income from all sources for applicant's spouse and each owner was to be listed and was not to exceed the income limit; and
- (c) intentionally providing false information could subject the applicant to interest charges in addition to immediate repayment of any tax relief received for years in which false information was provided.

I further assert that I detect no condition in this application/voucher, which would necessitate any documentation from this applicant in addition to that submitted.

COLLECTING OFFICIAL'S SIGNATURE

ALL SIGNATURES

I certify this information to be correct and understand that the information that I have provided is subject to verification through matching programs with the social security administration. I understand that I could be subject to interest for intentionally providing false information.

APPLICANT'S SIGNATURE

SPOUSE / CO-OWNER / RESIDENT REMAINDER SIGNATURE

WITNESS TO SIGNATURE MARK

Signature of two witnesses required if applicant is unable to sign their name and can only sign by making a mark:

Witness Signature and Address

Witness Signature and Address

OTHER PARTY'S INCOME

(Only Elderly & Disabled Homeowners)

NO INCOME IN 2024

INCOME LIMIT - \$37,530

SSA BENEFITS

SSI BENEFITS

RETIREMENT / PENSION

VETERAN'S BENEFITS

WORKER'S COMP

WAGES & SALARIES

DIVIDENDS & INTEREST

OTHER INCOME

RENTAL INCOME

INCOME LOSS (-)

TOTAL 2024 INCOME

2ND PARCEL ID

COMMENTS



Tenn. Code Ann. § 67-5-701 through 67-5-704

Division of Property Assessments

CT-0067 Rev. 3/2025



Examples of Acceptable Documentation to Prove Residency

If the address on your license or ID is *different* from the address on your Tax Relief application, the state will need proof of residency.

Submit one of the following items to confirm your residence in 2025:

- * Valid driver's license
- * Valid state-issued ID card
- * Bank statement
- * VA letter
- * Voter's registration card
- * Automobile insurance policy
- * Social Security letter
- * Two different utility bills that include the service address and mailing address (cell phone bills not acceptable unless other services are included)

PLEASE NOTE: These documents must be dated for the tax year (2025) in which Tax Relief is being applied, or earlier.