

**APPLICATION FOR CERTIFICATE OF ELIGIBILITY
FOR VETERANS' TAX EXEMPTION**

INSTRUCTIONS

PRINT, USE INK OR TYPEWRITER TO COMPLETE ALL ITEMS.
PLEASE READ INFORMATION ON THE REVERSE SIDE OF FORM.
DO NOT COMPLETE THIS FORM IF YOU HAVE ALREADY APPLIED FOR AND RECEIVED
AN ORIGINAL VETERANS' TAX EXEMPTION CERTIFICATE!
IF AN ORIGINAL CERTIFICATE HAS BEEN LOST OR STOLEN, PLEASE REFER TO
VSC FORM ENTITLED "Affidavit of Loss of Veterans' Tax Exemption Certificate".

WWI WWII KOREAN CONFLICT VIETNAM CONFLICT PERSIAN GULF CONFLICT

1. NAME OF APPLICANT (Last, First, Middle)

UNMARRIED

 VETERAN WIDOW

2. ADDRESS (Number and Street, City, County, State, ZIP code)

MILITARY SERVICE INFORMATION

3. NAME OF VETERAN (to correspond with name on honorable discharge)

SOCIAL SECURITY NO.

DATE OF BIRTH

4. ACTIVE SERVICE

BRANCH OF SERVICE	DATES OF ACTIVE SERVICE		PLACE OF ENTRY	PLACE OF SEPARATION	SERVICE NUMBER DURING THE PERIOD
	DATE ENTERED	DATE SEPARATED			

5. SERVICE DISABLED? YES NO SERVICE AMPUTEE YES NO VETS CLAIM NO. (if any):

6. IF APPLICATION IS MADE BY UNMARRIED WIDOW GIVE DATE

VETERAN BECAME RESIDENT OF NEW MEXICO _____

DATE OF DEATH _____ PLACE OF DEATH _____

HAVE YOU REMARRIED SINCE THE DEATH OF THE VETERAN LISTED ABOVE?

 YES NO7. I AM

NOW A LEGAL RESIDENT OF THE STATE OF NEW MEXICO. I became or have been a legal resident of New Mexico since:

 I AM NOT

DATE: _____

8. **CERTIFICATION OF APPLICANT**

I CERTIFY THAT ALL STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. FURTHER, I UNDERSTAND THAT IN THE EVENT I HAVE KNOWINGLY AND WILLFULLY MADE ANY FALSE STATEMENTS, I WILL BE LIABLE TO PUNISHMENT IN ACCORDANCE WITH APPLICABLE LAW.

SIGNED_____
DATE**Certification of Authorized Official (to be utilized by authorized VSC Employees ONLY)**

I CERTIFY THAT EVIDENCE OF THE TRUTH OF THE FOREGOING STATEMENTS OF APPLICANT HAS BEEN PRESENTED TO ME AND THAT I AM SATISFIED THE STATEMENTS ARE TRUE. THIS EVIDENCE CONSISTS OF THE FOLLOWING INSTRUMENTS AND WRITINGS:

Signature

**ATTENTION APPLICANTS: PLEASE REFER TO THE REVERSE SIDE OF THIS FORM FOR INFORMATION
WHICH MUST ACCOMPANY THIS APPLICATION.**

INFORMATION TO VETERANS

You are eligible for benefits under the provisions of Chapter 7, Section 7-37-5, New Mexico Laws of 1978, as amended by Chapter 68 laws of 1992.

IF

You have been honorably separated from military service of the United States and served continuously for a period of 90 or more days during a period of armed conflict. If discharged with less than 90 days service, such discharge must have been as a result of service incurred disability.

WORLD WAR I – Service must have been between April 6, 1917 and April 1, 1920.

WORLD WAR II – Service must have been between December 7, 1941 and December 31, 1946.

KOREAN CONFLICT – Service must have been between June 27, 1950 and January 31, 1955.

VIETNAM CONFLICT – Service must have been between August 5, 1964 and May 7, 1975.

PERSIAN GULF CONFLICT – Service must have been between August 2, 1990 through the date upon which the President of the United States or a competent military authority declares the conflict to be ended, but in no case earlier than July 1, 1992.

AND

you are a legal resident of the state of New Mexico. Your benefits are forfeited upon becoming a resident of another state.

INFORMATION FOR UNREARRIED SPOUSE OF VETERANS

You are entitled to the above benefits if you are the unremarried spouse of a veteran who served under the conditions outlined in the information shown above or if you are an unremarried widow or widower of a veteran who died in service under the conditions cited above, and you are a legal resident of the state of New Mexico.

APPLICATION

Veterans: Application must be forwarded, together with copy of DD 214 (Report of Separation) or equivalent Department of Defense document, and proof of residency to:

NEW MEXICO VETERANS' SERVICE COMMISSION
P.O. BOX 2324, SANTA FE, NEW MEXICO 87503

Widows: Application must be forwarded, together with copy of veteran's DD 214, copy of Death Certificate, and proof of residency to the address listed above.

***It is the policy of this office to accept ONLY one of the following as proof of residency: (1) copy of Voter's Registration; (2) Latest copy of N.M. Income Tax Return, (3) two notarized statements from individuals who will verify residency.

***Any Department of Defense Document which is submitted in lieu of a DD 214 which does not verify **dates** and **length** of service will be returned to the applicant.

PENALTY

The Commission may cancel any certificate of eligibility heretofore issued when it shall, after hearing upon written notice, determine that any material statement in the application is false.

Section 7-38-17H of the law provides a penalty which states in part as follows: "any person . . . intentionally claiming and receiving the benefit of an exemption to which he is not entitled . . . is guilty of a misdemeanor and shall be punished by a fine of not more than one thousand dollars (\$1,000)."