



**Commissioner of the Revenue  
Christopher R Jones, CAE, MCR  
PO Box 96  
Jonesville VA 24263**



**CERTIFICATION OF QUALIFICATION FOR LICENSE FEE TAX EXEMPTION OF VEHICLE OPERATED BY A  
MEMBER OF THE LEE COUNTY VOLUNTEER RESUE SQUAD OR FIRE DEPARTMENT**

**FILING DEADLINE IS MARCH 31, 2025**

**MEMBER INFORMATION**

Member \_\_\_\_\_ Last 4 of Social Security # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**VEHICLE INFORMATION**

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

VIN \_\_\_\_\_ Title # \_\_\_\_\_ License # \_\_\_\_\_

Name of Owner/Co-Owner \_\_\_\_\_

**I hereby certify that I am a member of the Lee County Volunteer Rescue Squad or Volunteer Fire Department and that I routinely use the vehicle listed above to respond to calls.**

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

**CERTIFICATION OF SQUAD PRESIDENT/FIRE CHIEF**

I certify that the above is a member of this organization in good standing and the vehicle listed was regularly used to respond to such calls or to perform other duties associated with their volunteer membership. I attest that the above individual meets the requirements of Lee County Code and is entitled to the special taxation privileges therein. I further affirm that this information is correct to the best of my knowledge.

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

Name of Volunteer Organization \_\_\_\_\_

**FOR OFFICE USE ONLY**

Account # \_\_\_\_\_

Received By \_\_\_\_\_

Date \_\_\_\_\_