

Account#



HIGH MILEAGE APPLICATION – CITY OF MANASSAS

Commissioner of the Revenue

PO BOX 125 – MANASSAS VA 20108

(703) 257-8206

Personal Use-Passenger Vehicles Only

*Form must be filed each year by **APRIL 15.***

Applications received without proper documentation will not be accepted or processed. High Mileage deductions are taken directly from N.A.D.A.

Owner(s) Name: _____
{As titled on DMV}

Social Security Number: _____

Address: _____

Email Address: _____

Vehicle Year: _____ Vehicle Tag Number: _____

Vehicle Make and Model: _____

Vehicle ID# _____

Phone Number: _____

MILEAGE ON JANUARY 1 OF THE CURRENT TAX YEAR: _____

Personal Use Vehicle *greater than 51%*: Yes No {circle one}

You must attach a legible copy of one of the following for this vehicle showing the identification#

- **Unaltered inspection receipt**
- **Oil change/service repair receipt from car care center**
- **Odometer certification certificate**

I certify that the above vehicle is not used for more than 50% business use and/nor do I depreciate the vehicle on my Income Tax Return.

Print Name: _____

Signature: _____

Date: _____