

Domicile Questionnaire

File No./ Examiner No.

Date

You are not legally required to complete this questionnaire, in whole or in part. However, the State Tax Commissioner can acquire the information requested in this questionnaire by resorting to legal process, as provided by law. Moreover, failure to complete this questionnaire, in whole or in part, may work to your disadvantage in the Department's determination of your domiciliary status.

Your full name

Your Social Security number

Your spouse's full name

Spouse's Social Security number

Your present address

You are generally considered a Virginia resident if: 1. You have lived in Virginia for an aggregate of 183 days or more. 2. If you moved into the state at anytime during the year with the intent of establishing a permanent residence in Virginia. 3. If you are registered to vote in Virginia. 4. If your principle residence is in Virginia. 5. If your vehicle is registered in Virginia. 6. And if you are an active duty member of the Armed Forces of the United States and Virginia is listed as your home of record, regardless of where you are stationed or the duration of your assignment.

You are requested to answer the following questions completely and accurately so that the Department of Taxation may have sufficient facts in making a determination of Virginia state tax liability. Please mail this completed form to the Department of Taxation, P. O. Box 1880, Richmond, Va. 23218-1880.

1. Give the periods during which you have lived in Virginia, and the address at which you lived for each period.

From		To		Address
Month	Year	Month	Year	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2. Give the periods during which you lived outside of Virginia, and the address at which you lived for each period.

From	To	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Have you ever purchased a home in Virginia? _____. When? _____.
Where? _____. Do you currently own this home? _____.
If no, when did you dispose of it? _____.
3. Have you any children attending the public free schools in Virginia? _____.
4. Are you registered to vote in Virginia? _____. If so, when did you register to vote in Virginia? _____. When did you last vote in Virginia? _____.
5. If you are not registered to vote in Virginia, in what state are you registered? _____.
When did you last vote in that state? _____.

6. Have you paid any state or local property taxes any where during the last six years? _____ . If so, in what state and locality were the taxes paid? _____ . For what years were the taxes paid? _____ .
7. Does your automobile bear a Virginia license plate for the current year? _____ . If so, what years have this automobile, and its predecessors, borne Virginia license plates? _____ . If your automobile does not bear Virginia license plates, what State's license plate does it bear? _____ . When was your automobile, or its predecessors, first licensed in that State? _____ .
8. Do you hold a Virginia motor vehicle operator's license? _____ . If so, when were you first licensed in Virginia? _____ . If this license was not renewed, please the reason the license was not renewed _____ . If you do not now hold a Virginia operator's license, what State's operator license do you currently hold? _____ .
9. Do you currently hold an identification card issued by the Virginia Department of Motor Vehicles? _____ . Do you currently hold any other identification card issued by another agency of the State of Virginia or local government, such as a Social Services identification card? _____ .
10. By whom are you currently employed? _____ . By whom were you employed during each of the last three years?

11. Please name the State that you claim as your State of residence _____ . Please explain briefly any ties or connections, either with business or personal reasons, which you may still have with that State.

Service Personnel

12. On what date did you enter into active duty with the Armed Forces of the United States? _____ .

13. In what State, and at what address, were you actually living at the time you were ordered to report for active duty? _____ . How long had you been living at this address? _____ .
14. If you are currently not on active duty, on what date were you discharged? _____ .
15. Where did you live immediately after your discharge? _____ .
16. If you were married at the time of your discharge, where did your spouse and children live at that time? _____ .
17. Please name the State that you claimed as your legal resident while you were on active duty? _____ . Is this the State listed on your Leave and Earning Statements (LES)? _____ . If no, what State is listed on your LES? _____ .

I declare under penalties provided by law that, to the best of my knowledge and belief, the foregoing answers and statements are true and complete.

Signature

Date