



# Veteran Income Tax Exemption Submission Form

**You Must Send a Copy of Your [Official Discharge Document](#) With This Form.**

We only need a copy of your records the first time you claim the exemption. Once you receive confirmation we have accepted your discharge paperwork, you claim the exemption on your return annually.

**You do not need to provide documentation each year.**

## Personal Information

Name: \_\_\_\_\_  
*Last* *First*

Social Security Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Spouse Name: \_\_\_\_\_  
*Last* *First*

Spouse Social Security Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*  
\_\_\_\_\_  
*City* *State* *ZIP Code*

Home Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Signature

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

Spouse Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Where to Send the Completed Form

**Online**, use our secure document [upload](#) feature.  
Enter the notice code **VET** and select **PO Box 440**;

**Mail**, with a copy of your [discharge document](#) to:  
**New Jersey Division of Taxation**  
**Veteran Exemption**  
**PO Box 440**  
**Trenton, NJ 08646-0440**; or

**Fax** with a copy of your [discharge document](#) to: **609-633-8427**.