



**CONDOMINIUM/COOPERATIVE
PROPERTY TAX ABATEMENT
APPLICATION AND INSTRUCTIONS**

**2012
2013**

Mail to: New York City Department of Finance, Property Division, 66 John Street, 12th Floor, New York, NY 10038

Filing Deadline: February 15, 2012

Instructions: This application is to be used for properties that did not file for prior years and are providing data for the first time. Applicants must submit a completed application for the abatement of **2012/2013** real estate taxes to the Department of Finance no later than **February 15, 2012**. **An application can be submitted by the board of managers or managing agent on behalf of the entire development.**

SECTION A - DEVELOPMENT INFORMATION - The following pertains to the **entire** condominium/cooperative

In this section, provide information for the development as a whole. Information should be accurate as of January 5, 2012.

Please check filing status (Required): **Condominium** **Cooperative**

1. Parcel Identification

Enter the borough, tax block and tax billing lot in the lines provided below. If you are filing as a condominium, the tax billing lot will be a four digit number beginning with "75". If the development is comprised of more than three blocks, please use additional sheets.

a. Condo: _____ **75** _____ _____ **75** _____ _____ **75** _____
 BORO BLOCK LOT BORO BLOCK LOT BORO BLOCK LOT

b. Co-op: _____ _____ _____ _____ _____ _____ _____ _____ _____
 BORO BLOCK LOT BORO BLOCK LOT BORO BLOCK LOT

2. Name of Development

Enter the name (if any) by which the development is known.

3. Employer Identification Number (EIN)

Enter the condominium/cooperative Employer Identification Number:

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4. Notification

Enter the name, address, telephone number and fax number of the condominium's/cooperative's designated contact person.

a. _____ CONTACT PERSON
 NAME OF PARTY DESIGNATED TO RECEIVE NOTICES

b. _____ CITY AND STATE _____ ZIP CODE
 NUMBER AND STREET

c. _____ d. _____ e. _____
 TELEPHONE NUMBER FAX NUMBER EMAIL ADDRESS

5. Address of development, if single building.

Enter the address of the development if it is made up of only one building.

For developments with more than one building, skip this line and enter the address information in Question 7 on Page 2.

_____ CITY AND STATE _____ ZIP CODE
 NUMBER AND STREET

6. Total Number of Units

Enter the total number of residential units in 6a, the number of units controlled by the sponsor(s) or successors in interest in 6b, the total number of commercial units in 6c, and enter the grand total of (6a & 6c) in 6d. If there are no commercial or sponsor-controlled units, enter zero. In order to qualify as residential, a unit must be used for residential purposes only. If you checked "Condominium", enter the number of units. If you checked "Cooperative", enter the number of units and shares. If there are no shares allocated to a super's apartment, do not include it in the total number of units.

a. Total Number of Residential Units/Shares, Including Sponsor Units: Units: _____ Shares: _____

b. Total Number of Residential Units/Shares, Owned by Sponsor: Units: _____ Shares: _____

c. Total Number of Commercial Units/Shares: Units: _____ Shares: _____

d. Grand Total of Residential and Commercial Units/Shares (Add 6a & 6c): Units: _____ Shares: _____

SECTION A - DEVELOPMENT INFORMATION - Continued

7. Enter Number of Buildings in Development: _____

If this is a development with one building, skip this question and go to Section B. If the development has more than one building, enter the total number of buildings and use one line to enter each street number, street name and the number of residential and commercial units. Continued from Section A, Question 5.

	BLOCK NUMBER	LOT NUMBER/RANGE	STREET NUMBER	STREET NAME	NO. OF RESID. UNITS/SHARES	NO. OF COMM. UNITS/SHARES
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						
31.						
TOTAL #:						

CERTIFICATION BY CONDOMINIUM/COOPERATIVE BOARD OF DIRECTORS

Certification must be signed by an Officer of the condominium's or cooperative's Board of Directors

I certify that all the information contained in this application is true and correct to the best of my knowledge and belief. I understand that the willful making of any false statement of material fact herein will subject me to the provisions of the law relevant to the making and filing of false instruments and will render this application null and void.

1. _____
Signature of Officer _____ Print Name _____

Title of Officer _____ / _____ / _____
Date Telephone Number _____ Email Address _____

2. _____
Signature of Officer _____ Print Name _____

Title of Officer _____ / _____ / _____
Date Telephone Number _____ Email Address _____

