

#### How to Submit the Affidavit

Online: www.nyc.gov/ccrenewal

Mail: NYC Department of Finance, Co-op/Condo Abatement, P.O. Box 311, Maplewood, NJ 07040-0311

## Deadline:

February 15 (or the next day if this falls on a weekend or holiday)

## Instructions:

The prevailing wage affidavit must be filed for properties that have 30 or more dwelling units and an average assessed unit value of more than \$60,000, or that have less than 30 dwelling units and an average assessed unit value of more than \$100,000.

# How and When to File the Affidavit:

You can submit your completed and notarized prevailing wage affidavit when you file your initial or renewal application at www.nyc.gov/ccrenewal.

In order to complete the affidavit, you will need to provide the cooperative number or condominium number for which you are applying. This number is available on the Tax Benefit Letter or can be looked up at www.nyc.gov/ccabatement.

The prevailing wage affidavit must be submitted on an annual basis along with the renewal or change form.

If there are no building service employees as described in the definition below, check the box on the affidavit to confirm this.

## **Definitions:**

"Prevailing wage" means the rate of wages and supplemental benefits paid in the locality to building service workers in the same trade or occupation and annually determined by the New York City Comptroller's office in accordance with the provisions of section two hundred thirty-four of the labor law.

"Building service employee" means any person who is regularly employed at a building who performs work in connection with the care or maintenance of such building. "Building service employee" includes, but is not limited to, watchman, guard, doorman, building cleaner, porter, handyman, janitor, gardener, groundskeeper, elevator operator and starter, and window cleaner, but shall not include persons regularly scheduled to work fewer than eight hours per week in the building.

## How to Get Help:

If have questions or need assistance, please contact us at www.nyc.gov/contactdof or call 311.

# AFFIDAVIT OF CERTIFICATION REGARDING PREVAILING WAGE REQUIREMENTS FOR TAX YEAR 2025-2026

Re:		
	(Name o	f Development)
Please select development	type (select one): 🗌 Cor	ndominium 🗌 Cooperative
STATE OF NEW YORK	)	
	) ss.:	
COUNTY OF	)	
	, being o	duly sworn, under penalty of perjury, deposes and says:
1. I am		(name and title), and am duly authorized to make this
affidavit on behalf of the		(Board of Managers or Board of Directors)
of the		(condominium / cooperative name)
	(condomir	nium / cooperative number) for property located in the
borough of		
2. I make this affidavit in o	rder to comply with the prov	isions of section 467-a of the Real Property Tax Law.
3. I have read and underst section 467-a of the Re		e Cooperative/Condominium Abatement pursuant to
	loyed at the above-referenc	Property Tax Law, I certify that all building service employees ed property shall receive the applicable prevailing wage for
Check this box if the ab	ove-referenced property do	es not employ building service employees.
Signature of Officer or Author	ized Agent	Sworn to me this day of,
Signature of Officer of Author	izeu Ageni	20

Title of Officer or Authorized Agent

Notary Public