

APPLICATION FOR CORRECTION OF ASSESSMENT EXEMPTION OR CLASSIFICATION CLAIMS FORM TC106 INSTRUCTIONS FOR 2025/26

BEFORE YOU COMPLETE THIS FORM, READ TC600 "HOW TO APPEAL A TENTATIVE ASSESSMENT".

Fee for Certain Applications. A \$175 fee is required for all applications where the assessed value on the notice of property value for 2025/26 is \$2 million or more (without regard to any exemption.) No fee is due if the Applicant or representative waives review of the application before it is scheduled for review. If any fee is unpaid, review of your application may be denied and any offer of correction revoked. The fee will be included on the real property tax bill. Do not pay the fee with this application.

WHO SHOULD USE THIS FORM? Use this form if you are making claims for the 2025/26 tax year that will begin on July 1, 2025 relating to: (a) tax classification, (b) eligibility for full or partial exemption (other than personal exemptions discussed below), or (c) unlawful assessment procedure. Use one application form for each tax lot (multiple condominium units in the same condo may be included on the same application.) Form TC106 may be used for all types of property, including condominiums and utility property. See below for when Form TC106 should NOT be used.

Exemption and classification appeals. Every year, the Finance Department determines an assessed value for every parcel of real property for real property tax purposes. The assessment includes a determination of the property's taxable status, i.e., whether it is subject to taxation and whether it is entitled to a full or partial exemption. All real property is taxable unless exempt by law.

The assessment also includes a determination of the property's classification for tax purposes, i.e., whether the property is in tax class one, two, three or four. The classification will determine which tax rate applies to the assessed value to calculate the tax. The classification may also affect the assessment ratio, which is the fraction of full market value at which the assessment is set, and the application of limitations on annual increases. See TC600 "How to Appeal a Tentative Assessment".

Classification. For New York City Real Property Tax purposes all real property in the City is designated as being in one of four classes:

- Class one includes:
- (a) all one-, two- and three- family residential real property, including properties having some commercial nonresidential space that are used primarily for residential purposes;
- (b) residential real property not more than three stories in height owned in condominium form BUT ONLY IF no residential unit was ever listed on the City's assessment roll as other than a condominium;

 (c) residential real property consisting of a one-family house that the owner lives in and that is located on land held in cooperative ownership by owner-occupiers, provided that;
 (i) such houses and land were part of bungalow colonies in existence prior to 1940; and (ii) the land is held in cooperative ownership for the sole purpose of maintaining one-family residences for members' own use; and

TC106INS 2025/26

- (d) all vacant land excluding land in Manhattan south of or adjacent to the south side of 110th street. However, any such vacant land that is not zoned residential must be located immediately adjacent to property improved with a class one residential structure, must have a total area of not more than 10,000 square feet and must have been under common ownership with the adjacent residential property at all times on and after January 1, 1989.
- Class two includes: all other residential real property that is not designated as class one, except hotels and motels and other similar commercial property.
- Class three includes: utility real property and property subject to former Real Property Tax Law section 470.
- Class four includes: all other real property which is not designated as class one, class two, or class three.

Exemptions. If you own property that you believe is entitled to an exemption such as a nonprofit, J51, ICIP or 421a exemption, you FIRST must apply to the Finance Department. Certain exemptions also require certification from other government agencies such as Housing Preservation and Development (HPD). More information is available from the Finance Dept. website at http://www1.nyc.gov/site/finance/taxes/property.page or the HPD website at: http://www1.nyc.gov/site/finance/taxes/property.page or the HPD website at: http://www1.nyc.gov/site/hpd/index or call 3-1-1. Section 494-a of the Real Property Tax Law governs exempt entities acquiring title to previously taxable property.

Some exemptions continue from one year to the next but you should check the tentative assessment roll for your property between January 15 and March 3 each year to see if your exemption has been continued for the tax year beginning July 1.

WHO SHOULD NOT USE THIS FORM?

- 1. DO NOT use Form TC106 to apply for Tax Commission review of Finance's denial or revocation or removal of a personal exemption such as STAR, Senior Citizen, Disabled, Veteran or Clergy exemption. See Form TC600 "How to Appeal a Tentative Assessment" for information about the appropriate forms to use for those exemptions.
- 2. DO NOT use Form TC106 if you are claiming ONLY that the assessment is unequal or the assessed value is too high (including claims relating to the value of the land only or to physical increases resulting from construction.) If your claim is based on these grounds only, use Form TC101 for property in classes two or four, Form TC108 for class one

property, or Form TC109 for class two or four condominium property. If you are making claims relating to an exemption or classification AND a claim of unequal or excessive assessment, you must make BOTH claims on Form TC106. <u>DO NOT FILE BOTH</u> A FORM TC106 AND FORM TC101, TC108 OR TC109.

- 3. DO NOT use Form TC106 if you claim only that the limits on increases in assessment for properties in tax class one and 2A/2B/2C subclass (up to ten residential units) have not been correctly applied or that the transitional assessments for other class two and class four properties have not been correctly calculated. Use the appropriate valuation form, Form TC101, TC108, or TC109 for those claims.
- 4.**DO NOT file Form TC106** to request a change in the <u>building class</u> for the property.
- 5. DO NOT file Form TC106 to request review of a revocation, denial or reduction of a tax abatement. Tax abatements (Coop/condo abatements, ICAP, etc.) are reductions in the tax liability and not related to the taxable assessed value of the property. Contact the Finance Dept. regarding abatement programs or call 3-1-1.

6.DO NOT file this Form TC106 UNLESS you either:

i) received a notice from the Finance Dept. denying, revoking or removing in whole or in part an exemption for your property for the 2025/26 tax year, including a Notice of Property Value or Revised Notice of Property Value stating that an exemption has been removed for the 2025/26 tax year; or

ii) are a nonprofit owner of the property and applied to the Department of Finance for an exemption for the first time since acquiring the property and have not received a response (see item b under "DEADLINES FOR FILING" below.)

NOTE: If the Department of Finance issued a notice denying, revoking or removing in whole or in part an exemption for your property for 2024/25 or any earlier tax year, do not file Form TC106 for any such years at this time (but see exceptions to filing deadlines). You must re-apply to the Department of Finance for an exemption for any such year unless you have an outstanding application pending with the Tax Commission for that year.

The following definitions apply to all parts of this Form TC106:

Owner. An individual or entity having legal title to the property.

<u>Related persons.</u> When used in this form the word person includes a corporation or other business entity. Related persons include individuals related by blood, marriage or adoption, individuals and the business entities they control, business entities under common control, and fiduciaries and the beneficiaries for whom they act.

What other documents, forms and instructions are required?

Documents required to support your claim. Attach copies of all documents relevant to your claim, including copies of any application for exemption filed with the Finance Dept., notices received from the Finance Dept. denying, revoking or reducing an exemption, and all required supplemental Tax

Commission forms. If you fail to include required documents the Tax Commission may deny review of your application. If your application relates to a 421a, J51 or ICIP exemption, you **MUST** attach a copy of your final Certificate of Eligibility from HPD or Certificate of Continuing Use from the Finance Dept. for ICIP. The Tax Commission also may request additional information.

Form TC10 Receipt. See below.

TC200 Addendum to Application. Form TC200 is required:

- If the Applicant is not i) the owner of the entire property, and not ii) a tenant of the <u>entire</u> property who pays all taxes and expenses of the property and who has the right to protest the assessment;
- If the Form TC106 is to be signed by an executor, administrator, guardian, trustee or other fiduciary;
- If the Applicant answers "YES" to either question in part 6 of Form TC106 regarding sale, demolition or construction at the property. If a sale or contract of sale is between unrelated parties, you must file Form TC230 instead of Form TC200.

See TC200 Instructions for complete information on when to file TC200. If TC200 is not filed with the TC106 when necessary, your TC106 will not be reviewed by the Tax Commission.

One or more of the following Tax Commission forms also may be required as an attachment to the application:

- TC201 Income and Expense Schedule for Rent Producing Property
- TC203 Income and Expense Schedule for Cooperatives and Condominiums
- TC208 Income and Expense Schedule for a Hotel
- TC214 Income and Expense Schedule for Stores, Theaters, and Parking Lots & Garages (where the Applicant or a related person operates the business).
- TC230 Sale Statement
- TC244 Agent's Statement of Authority and Knowledge (for applications signed by an agent. See Part 4 below "Who may sign the application?").
- TC309 Accountant's Certification (attachment to Form TC201 for properties assessed at \$5,000,000 or more). Form TC309 must be attached to the income and expense schedule and cannot be filed separately.

Where to get additional forms and information. Tax Commission forms are available at the Tax Commission's main office, and at Finance Dept. Business Centers in each borough, and at <u>http://www.nyc.gov/taxcomm.</u> If you have questions about the application procedure, contact the Tax Commission by e-mailing tcinfo@oata.nyc.gov or calling 3-1-1.

DEADLINES FOR FILING. Unless your property is in tax class one, your application must be received by 5:00 p.m. on March 3, 2025. If your property is in tax class one, your

application must be received by 5:00 p.m. on March 17, 2025. **NOTE**, if you are requesting a tax class change from tax class 2 (including 2A and 2B), 3 or 4 to tax class one, <u>your</u> <u>application must be received by March 3 not March 17</u>.

The deadlines are set by law and cannot be waived or extended for any reason. Late applications are void.

Exceptions to above filing deadlines:

a) Finance notice dated after February 1, 2025. If you received a notice from the Finance Dept. denying or revoking an exemption for your property for the 2025/26 tax year, or a notice of apportionment or increase in your assessed value for the 2025/26 tax year dated after February 1, 2025, you can file form TC106 within 20 days after the date of the Finance Dept. notice.

b) Denial of First Time Application for Exemption by New

Nonprofit Owner. If you are a nonprofit entity and, for the first time since you acquired title to the property, you applied to the Finance Dept. for an exemption covering the 2025/26 tax year, AND EITHER: i) you received a Finance Dept. notice denying the exemption in whole or in part; or ii) it has been at least 90 days since you filed the application and you have not received a response from the Finance Dept., you may file TC106 within 30 days after the later of: the date of the Finance Dept. notice; or the 90th day after your application was filed with the Finance Dept. See RPTL §494(a)(4).

Where to file. You are strongly urged to file your application in person at the Tax Commission office in Manhattan (One Centre St., 24th Floor, Room 2400). Applications may also be filed in person at a Finance Business Center. Finance Business Center locations:

Bronx - 3030 Third Avenue (East 156th Street): Business Center 2nd Floor

Manhattan - 66 John Street (William Street): Business Center 2nd FI.;

Brooklyn - 210 Joralemon Street: Business Center

Queens - 144-06 94 Avenue (Sutphin Boulevard): Business Center 1st Fl.;

Staten Island - 350 St. Marks Place (Hyatt Street): Business Center 1st Fl.;

Utility Property - 66 John Street, Assessment Office 13th Fl.

Finance Business Centers are open weekdays from 8:30 AM to 4:30 PM, except on City holidays including Martin Luther King's Birthday and Presidents' Day. Dial 3-1-1 for further information.

Filing by mail. Mail the completed Form TC106 to the Tax Commission at 1 Centre Street, Room 2400, New York, NY 10007. NOTE: Applications received after the deadline will not be reviewed even if they were mailed before that date.

<u>GET A FILING RECEIPT.</u> Complete a receipt (Form TC10) and have it stamped when filing your application. Retain the TC10 because it is the only acceptable proof of timely filing. Proof of mailing, or a return-receipt from the post office or private delivery service is not adequate proof of receipt by the Tax Commission. See TC10 instructions if you are mailing your application.

Applications may not be filed by fax or e-mail.

Make two copies. File an original plus one complete copy. Also, keep a copy for your records and to use at your hearing.

SPECIFIC PART INSTRUCTIONS: All Applicants must complete Parts 1, 2, 3, 6, 8, 9, 11 and 14. If you have a claim relating to exemption or a claim that the assessment is unlawful or excessive for reasons other than overvaluation, you must also complete Parts 4, 12 and 13. If you claim that the Finance Dept. placed the property in the wrong tax class you must also complete Parts 5 and 13.

Part 2. APPLICANT. The Applicant must be an individual or entity having an interest in the property directly affected by the assessment, such as a tenant paying all expenses including taxes who is authorized to protest the assessment. The Applicant cannot be an officer, employee, director, cleric or other individual representing the owner of the property.

NOTE: Form TC200 may be required because the Applicant is neither the owner nor net tenant of the entire property. Form TC200 must be filed with the application and cannot be filed later with Form TC159. See Form TC200 instructions.

When is an income and expense schedule required? An income and expense schedule is required for applications on properties that earned rental income in 2024, except residential properties with six or fewer units and no nonresidential space. See below for the appropriate income and expense form to file:

- Use Form TC201 if the property produced rental income in 2024 unless one of the following income and expense forms is required:
- Use Form TC203 for residential and commercial cooperatives and condominiums.
- Use Form TC208 for hotels and motels.
- Use Form TC214 for department stores, public parking garages and lots, and theaters where the Applicant is the business operator or a related person. If the Applicant operates such a business in part of the property, and rents part of the property, attach both Form TC201 and Form TC214. Form TC214 is not required for department stores with less than 10,000 gross square feet of retail space.

An income and expense schedule is not required if:

- The property produced no rental income in 2024;
- Applicant's operation began after July 1, 2024, unless the prior operator was a related person;
- Property is exclusively residential with six or fewer apartments and NO nonresidential space; or
- Property is used by the owner or a related person operating a business at the property such as a factory, bank, club, nursing home or office for which Form TC214 is not required.

PART 3. REPRESENTATION/CONTACT INFORMATION.

Applicants may designate themselves or any other person or firm as the authorized representative to be contacted by the Tax Commission about the application and to appear at the hearing. Only the designated representative may contact the Tax Commission about the application and the Tax Commission will only contact the designated representative about the application. To change the designated representative at any time, you must file Form TC155.

PART 4. EXEMPTION CLAIM. See "WHO SHOULD USE THIS FORM?" and "WHO SHOULD NOT USE THIS FORM?" for what exemption claims may be filed on this Form TC106.

PART 5. REQUEST TO CHANGE TAX CLASS.

Inspection. If you are filing TC106 to request a tax class change, your application will be referred to the Finance Dept. for a physical inspection. A Finance Dept. assessor will contact the representative named in Part 3 to arrange for inspection of the property. If Finance has not arranged an inspection before April 24, contact the Tax Commission immediately by e-mailing tcinfo@oata.nyc.gov, or risk denial of review. If you do not make the property available for inspection, your request for a tax class change will be denied.

PART 6. SALE, DEMOLITION OR CONSTRUCTION AFTER JANUARY 5, 2023. If you do not answer both questions in Part 6, your application will not be reviewed by the Tax Commission.

Definitions for purposes of Part 6:

<u>Construction or major alteration.</u> Construction or major alteration work includes any work that (a) increases the enclosed floor area or cubic content of a building, (b) renovates a substantially vacant building (c) converts the use of one or more floors of a building, such as from office to residential use, (d) completes renovation, or tenant installations affecting at least 25% of a building's area, (e) installs or replaces HVAC, elevators, electric wiring or plumbing, (f) replaces at least one of the exterior faces of the building, or (g) costs or is expected to cost an amount that equals or exceeds the tentative total actual assessment under review.

<u>Demolition.</u> Demolition is any work involving the dismantling, razing or removal of all of a building or structure, or the dismantling, razing or removal of structural members, floors, interior bearing walls, and/or exterior walls or portions thereof.

PART 9. HEARING REQUEST. If an in-person hearing is scheduled, a person having direct personal knowledge about the use of the property should attend. In-person hearings are granted for requests for reclassification and nonprofit exemption claims. In-person hearings on nonprofit exemptions will be conducted only in Manhattan. In-person hearings on reclassification claims may be requested in any borough but will be granted only as time and Tax Commission resources allow. Claims relating to J51, ICIP or 421a exemptions will be reviewed on papers submitted; no in-person hearing will be scheduled.

PART 10. VALUATION CLAIM. You must complete Part 10 to claim that the assessed value, before any exemption, is excessive. <u>Do not file a separate Application for Correction</u> on Form TC101, TC105, TC108 or TC109. You must attach an explanation of the basis for your claimed market value and submit any relevant factual information.

PART 13. APPROXIMATE GROSS FLOOR AREA. Where floor area is called for, state the approximate gross floor area to the best of your knowledge and ability. The measurement should be from exterior wall to exterior wall for each floor.

If, in connection with a request for reclassification, you are claiming that Finance Dept. records of gross floor area are incorrect, you must submit an architect's or engineer's calculations or other suitable proof.

PART 14. WHO MAY SIGN?. Applications are not valid unless signed by: (i) the Applicant identified on the application; (ii) the Applicant's fiduciary; or (iii) an authorized agent. If the Applicant is a corporation, an officer authorized to act for the corporation may sign and must state his or her title, such as president or treasurer. A general partner may sign for a partnership. A member or manager of, or individual officer of, a limited liability company may sign for the company. Any other agents, including but not limited to attorneys, members of the board of directors, organization members, corporate employees, and tax or property managers, may sign only if the agent BOTH: i) has personal knowledge of the facts reported on the application (knowledge based on conversations with the owner and/or review of books and records alone does not constitute personal knowledge); AND ii) attaches BOTH a notarized power of attorney and Form TC244 Agent's Statement of Authority and Knowledge. Unless the property is in tax class one, the person who signs also must acknowledge the signature in person before a notary public.

Documentation of fiduciary's authority to sign. When a fiduciary, such as an executor, administrator, trustee, guardian, or conservator, signs the application, the fiduciary may be required to attach documentation of authority. **See Form TC200 instructions.** For example, executors must attach a photocopy of letters testamentary with the court seal visible. Letters testamentary must either be issued within the past five years or a certificate that such letters still are in effect must be provided.

Supplemental affidavits. Use a supplemental affidavit, Form TC159, to provide additional information, to correct any information that is misstated in the application or attachments, or to furnish required information omitted from the application. See Forms TC600 and TC159.

Judicial review of your assessment. If you have filed Form TC106 but received no offer or did not accept an offer, you may commence a proceeding under Article 7 of the Real Property Tax Law. The proceeding must be commenced before October 25, 2025 (that is, no later than October 24, 2025). For more information, refer to TC707 Judicial Review of Assessments. Alternatively, if you claim a complete exemption for a nonprofit organization under section 420-a of the Real Property Tax Law, you may be entitled to commence a proceeding under Article 78 of the Civil Practice Law and Rules within four months after May 25, when the assessment for the 2025/26 tax year is deemed final.

As a condition of accepting any offer granting an exemption in whole or in part, changing the tax class or reducing the assessed value, you must agree not to commence or continue litigation regarding the assessment or exemption.

YEAR	BOROUGH	BLOCK	LOT	GROUP #	🗆 High Value	REVIEWED BY
2025/26					🗆 Сору	
and the second			OF THE CITY			
	1 Cent	tre Street, Ro	om 2400, New	York, NY 10007		TC106
	APPLIC	ATION FOR	CORRECTION C	OF ASSESSMEN	r	2025/26
·1625·	EXE	MPTION OR I	RECLASSIFICA	TION CLAIMS		2020/20
* KATIS				RAN OR CLERGY EXE		
N	READ TC106 INSTRUCTION IOTE: a \$175 FEE MAY BE RE					ı
	ENTIFICATION - A sepa					
	Manhattan, Queens or Staten Island)	BLC		LOT		SESSMENT YEAR
FULL ADDRESS OF PROPER	RTY (WITH ZIP CODE)					2025/26
	· · · ·					
	other lots on same block?					
From lot To lot	his application covers more thar t From lot	To lot	•	ler across the page.	n lot To lot	
1	2		3	4	<u></u>	
A	dditional ranges listed on pages	·	Сс	ondominium number		
UTILITY PORTION OF	ROLL: Identification No.		Billing No			
	Must be an owner or other pe	erson directly af	fected by the asses	sment, not an officer	, director or other r	epresentative. See
instructions.						
NAME OF APPLICAN						
	er/title holder of entire property?	、 ,				
	t of entire property who pays all	property charges a	and has the right to pro	otest the assessment? _	(Y/N). If YES pro	ovide lease
information on Form TC	enant of the entire property, desc	ribe Applicant's rel	ationship to property.			AND submit Form
	blication. NOTE: IF TC200 IS N				· · · · · · · · · · · · · · · · · · ·	
	eive any rental income from the					r.
	TION/CONTACT INFOR	MATION - Con	nplete this section	on even if you will	represent yours	elf.
PHONE NO.)		FAX NO.)		
NAME OF INDIVIDUAL OR FI	RM TO BE CONTACTED	_		TITLE (IF INDIVIDU	AL)	GROUP #, IF ANY
FULL MAILING ADDRESS WI	TH ZIP CODE			EMAIL	ADDRESS	
	Applicant or officer of Application	,				_
	CLAIM – SEE INSTRUCTION ON REQUESTED (e.g., non	NS (NOT FOR ST	AR, SR. CITIZEN, DI	SABLED, VETERAN O	R CLERGY EXEMPT	IONS.)
	ept. revoke a pre-existing exemp			t for the 2025/26 tax v	ear? (Y/N).	
	to the Finance Dept. for an exem					cation and all
attachments.		.				
-	r ii), you MUST ATTACH a copy ding a Notice of Property Value i					
-	r Certificate of Eligibility or Certi	-				
	nd ii), DO NOT FILE THIS APP					
 b. Are you claiming the percentage is calcu 	exemption for the entire (100%)	property? (Y/N	I). If NO , enter the per	centage of property clai	med as EXEMPT:	% and explain how
1 0	npt from federal income tax?	(Y/N) If YES, en	ter IRC section	and enter Taxpayer ID#	#:	
	CHANGE TAX CLASS -	_ ` ` `				
a. Current Tax class			lass (1, 2, 3 or 4): _	c. Number c	of residential units:	
	LITION OR CONSTRUCT					s.)
-	023, has the property or an intere C230. If transfer or contract is l	-			、 ,	
	023, has there been any constru-	•		•		ew building been filed
with the Buildings Dept	-		•	•		J
	EADLINE IS MARCH 3, 2	2025 (tax class	s 2, 3 & 4) or MAF	RCH 17, 2025 (tax	class 1). Certair	n exceptions
apply. See Instru				-		
	TS - List all schedules and to the total and total			per the pages.		
n remea, submit Form	ns TC200, TC201, TC203 or TC2	∠ 14 as appropriate		st page number		
9. HEARING REC	QUEST - Indicate prefere	ence. Choose				¢
	papers submitted without an in-p				R	
-	on nonprofit exemption claim					
					DATE REC	

Signer's initials _____ You must initial this page if you do not use a two-sided application form.

10. VALUATION	N CLAIM – Complete	this Part to request a	a reduction	n in the to	otal actu	al assessn	nent	(before any exemption)			
a. Tentative actua	I assessed value of entire	property from Notice of P	roperty Value	е			a	a. \$			
b. Applicant's estimate of market value of entire property								b. \$	_		
•	Requested assessment = line b x applicable assessment ratio 6% (.06) or 45% (.45)										
	(The assessment ratios are 6% for tax class 1 and 45% for tax classes 2, 3 and 4.) Market value of land as if unimproved (if relevant) d. \$										
e. Market value added by construction or alteration during past two years e. \$											
If making a valuation claim, you must attach an explanation of the basis for the estimated market value above and attach supporting information. Applicant reserves the right to a lower assessment ratio in a proceeding for judicial review.											
	-		-	eview.							
11. PROPERTY NUMBER OF BUILDINGS	DESCRIPTION AS	OF JANUARY 5, 20 NUMBER OF STORIES ABO		YEAR OF C	CONSTRUCT	ION		YEAR OF PURCHASE			
NOMBER OF BOILDINGO				TEARO							
NUMBER OF DWELLING UNITS		NUMBER OF RETAIL UNITS		NUMBER OF VEHICLE PARKING SPACES		ES					
				6.1	Indoor: _			Outdoor:			
			ibe all us	es of the	e prope	erty (See ii	nstru	uctions)			
	ncy on January 5, 2025 lated person(s) uses the e										
	lated person(s) uses the fo		•	(s) for its c	oarua nwa	ses:					
	ted to other persons. If re										
□ Property is 100)% vacant										
								f worship, storage, etc. <u>Inclu</u>			
exempt and non-	exempt uses of the prope	<u>ty. State whether use is b</u>	y Applicant,	a related p	person or u	unrelated per	rson.	Attach additional sheets if n	ecessary.		
FLOORS 3 -											
SECOND FLOOR											
FIRST FLOOR											
BASEMENT											
	SPACE (e.g., cell tower/teleo					1 1.4.					
13. APPROXIM	ATE GROSS FLOOI	R AREA AS OF JAN	UARY 5, 2	2025. A	Attach a	additiona	al sh	neets if necessary.			
El a a a		Desidential	Det	-11	-						
Floor FLOOR 3 -	All uses (above grade		Reta		-	ffices		er (describe for each floor)	sa ft		
Floor FLOOR 3 - SECOND FLOOR	All uses (above grade sq sq	ft. sq.ft.	Reta	sq.ft.	0				sq.ft. sq.ft.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR	sq	sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft.	Reta	sq.ft. sq.ft. sq.ft.	0	ffices sq.ft. sq.ft. sq.ft.			sq.ft. sq.ft.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS	sq sq sq	sq.ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft. sq.ft.	Reta	sq.ft. sq.ft. sq.ft. sq.ft.	0	ffices sq.ft. sq.ft. sq.ft. sq.ft.			sq.ft. sq.ft. sq.ft.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA	sq sq sq sq sq	sq.ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft. sq.ft. ft. sq.ft.		sq.ft. sq.ft. sq.ft. sq.ft. sq.ft.	0	ffices sq.ft. sq.ft. sq.ft.		er (describe for each floor)	sq.ft. sq.ft.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE	sq sq sq sq E/OATH (must be no	sq.ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft.	perty is in	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. n tax cla	0 	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH	BLOCK	er (describe for each floor)	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus	sq sq sq E/OATH (must be n o st be signed by an individu	sq.ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft.	perty is in	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. s q.ft. tax cla facts who	0 ss 1) is: the Ap	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an ot	Othe BLOCK	er (describe for each floor)	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me	sq sq sq E/OATH (must be n o st be signed by an individue the signed by an individue the signed by an individue	sq.ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft. sq.ft.	perty is in edge of the C), which cor	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p	SS 1) is: the Appartnership	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH porcurate an of p or LLC is th	Othe BLOCH	er (describe for each floor)	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the A PRINT CLEARLY T	sq sq sq E/OATH (must be n o st be signed by an individue the signed by an individue the signed by an individue	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ptarized unless pro ial having personal know ted liability company (LLC gent. See Instructions. F	perty is in edge of the C), which cor	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p	SS 1) is: the Appartnership	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH porcurate an of p or LLC is th	Othe BLOCH fficer of ne App Ilt in di	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the A PRINT CLEARLY T Signer is :	sq sq sq E/OATH (must be n st be signed by an individue omber or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. otarized unless pro ial having personal know ted liability company (LLC gent. See Instructions. <u>F</u> IGNING	perty is in ledge of the C), which cor ailure to prop	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p portion, p	SS 1) is: the Appartnership	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH porcurate an of p or LLC is th	Othe BLOCH fficer of ne App Ilt in di	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application.	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURI This application must partnership, or a me or manager of the Ap PRINT CLEARLY T Signer is: (i) \Box Applicant name	sq sq sq E/OATH (must be n st be signed by an individue omber or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p portion, p portion, p	O ss 1) is: the Ap partnershi ify the sign	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an of p or LLC is the ner may resu	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (sq.ft. sq.ft. sq.ft. sq.ft. or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the Ap PRINT CLEARLY T Signer is: (i) □ Applicant name (ii) □ Officer of corp	sq sq sq E/OATH (must be n st be signed by an individ mber or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this bo porate Applicant or Condo	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p portion, p portion, p	O ss 1) is: the Ap partnershi ify the sign	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an of p or LLC is the ner may resu	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application.	sq.ft. sq.ft. sq.ft. sq.ft. or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the Ap PRINT CLEARLY TO Signer is: (i) \Box Applicant name (ii) \Box Officer of corp (iii) \Box General partner	sq sq sq E/OATH (must be no st be signed by an individ mber or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condo ner of partnership Applican	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p porty identi al) Part 2. Ti	o ss 1) is: the Ap bartnershij ify the sign	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an of p or LLC is the ner may resu	Othe BLOCH fficer one App It in di	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (sq.ft. sq.ft. sq.ft. sq.ft. or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURI This application mus partnership, or a me or manager of the Ap PRINT CLEARLY TI Signer is: (i) \Box Applicant name (ii) \Box Officer of corp (iii) \Box General partri (iv) \Box Member or m	sq sq sq E/OATH (must be n st be signed by an individu- ember or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condoo ner of partnership Applican nanager of, or individual of	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p portion, p porty identi al) Part 2. Ti 2. Title:	O ss 1) is: the Ap partnership ify the sign	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an of p or LLC is the ner may resu	BLOCH fficer of ne App ilt in di	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the Ap PRINT CLEARLY TO Signer is: (i) \Box Applicant name (ii) \Box Officer of corp (iii) \Box Officer of corp (iii) \Box General partr (iv) \Box Member or m (v) \Box An attorney, e	sq sq sq sq E/OATH (must be no st be signed by an individi- ember or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condoi ner of partnership Applican nanager of, or individual of mployee, property manag	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p port identi al) Part 2. Ti 2. Title: this box	ss 1) is: the Ap partnership ify the sign ittle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an of p or LLC is th ner may resu	BLOCH fficer of ne App ilt in di	er (describe for each floor) ^K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the A PRINT CLEARLY TI Signer is: (i)	sq sq sq E/OATH (must be n st be signed by an individu- ember or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condoo ner of partnership Applican nanager of, or individual of	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft. sq.ft. starized unless pro starized unless pro starized unless pro starized unless pro	perty is in ledge of the C), which cor ailure to prop a an individua s, named in med in Part 2 pplicant. (If ir applicati	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. facts who poration, p port identi al) Part 2. Ti 2. Title: this box	ss 1) is: the Ap partnership ify the sign ittle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an of p or LLC is th ner may resu	BLOCH fficer of ne App ilt in di	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the A PRINT CLEARLY TI Signer is: (i)	sq sq sq sq E/OATH (must be no st be signed by an individu ember or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condoo ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati	sq.ft. sq.ft. sq.ft. sq.ft. n tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b	O ISS 1) is: the Ap partnership ify the sign itle: (v) is ch e dismis	ffices sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH plicant, an of p or LLC is th ner may resu	BLOCH fficer of ne App ilt in di	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application mus partnership, or a me or manager of the A PRINT CLEARLY TI Signer is: (i)	sq sq sq sq E/OATH (must be n st be signed by an individue of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condor ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa	ft. sq.ft. sq.ft. sq.ft. sq.ft. <t< td=""><td>perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati prity must I me of entity:</td><td>sq.ft. sq.ft. sq.ft. sq.ft. n tax cla facts who poration, p portion, p porty identi al) Part 2. Ti this box on will b be attach</td><td>O ISS 1) is: the Ap partnership ify the sign ify the sign itle: c (v) is ch e dismis ned.)</td><td>ffices sq.ft. sq.ft. sq.ft. sq.ft. boROUGH por LLC is th ner may resu</td><td>Othe BLOCH fficer one App It in di AN</td><td>er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ID check <u>one</u> of boxes (i) – (ized Power of Attorney)</td><td>sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.</td></t<>	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati prity must I me of entity:	sq.ft. sq.ft. sq.ft. sq.ft. n tax cla facts who poration, p portion, p porty identi al) Part 2. Ti this box on will b be attach	O ISS 1) is: the Ap partnership ify the sign ify the sign itle: c (v) is ch e dismis ned.)	ffices sq.ft. sq.ft. sq.ft. sq.ft. boROUGH por LLC is th ner may resu	Othe BLOCH fficer one App It in di AN	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ID check <u>one</u> of boxes (i) – (ized Power of Attorney)	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meor manager of the Application muspartnership, or a meor manager of the ApPRINT CLEARLY TO Signer is: (i) □ Applicant name (ii) □ Officer of corp (iii) □ Officer of corp (iii) □ General partner (iv) □ Member or m (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. De (See TC600 ar If signing as fidu (vii) □ An officer, ge	sq sq sq sq E/OATH (must be n st be signed by an individue of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condor ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati prity must I me of entity: nat is the ger	sq.ft. sq.ft. sq.ft. sq.ft. n tax cla facts who poration, p portion, p portion, p port 2. Ti al) Part 2. Ti this box on will b be attach meral partn	O ISS 1) is: the Ap partnership ify the sign itle: (v) is ch e dismis ned.) er or man	ffices sq.ft. sq.ft. sq.ft. sq.ft. boROUGH por LLC is the ner may resu	Othe BLOCH fficer one App It in di AN	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney a ant.	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meor manager of the Application muspartnership, or a meor manager of the ApPRINT CLEARLY TO Signer is: (i) □ Applicant name (ii) □ Officer of corp (iii) □ Officer of corp (iii) □ General partner (iv) □ Member or m (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. De (See TC600 ar If signing as fidu (vii) □ An officer, ge	sq sq sq sq E/OATH (must be n st be signed by an individue of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condor ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati prity must I me of entity: nat is the ger	sq.ft. sq.ft. sq.ft. sq.ft. n tax cla facts who poration, p portion, p portion, p port 2. Ti al) Part 2. Ti this box on will b be attach meral partn	O ISS 1) is: the Ap partnership ify the sign itle: (v) is ch e dismis ned.) er or man	ffices sq.ft. sq.ft. sq.ft. sq.ft. boROUGH por LLC is the ner may resu	Othe BLOCH fficer one App It in di AN	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ID check <u>one</u> of boxes (i) – (ized Power of Attorney)	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meor manager of the Application muspartnership, or a meor manager of the ApPRINT CLEARLY TO Signer is: (i) □ Applicant name (ii) □ Officer of corp (iii) □ General partur (iv) □ Member or m (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. De (See TC600 ar If signing as fidu (vii) □ An officer, ge Enter name of end	sq sq sq sq E/OATH (must be n st be signed by an individue on the signed by an individue of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condor ner of partnership Applicant nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applicant	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati prity must I me of entity: mat is the ger me of entity	sq.ft. sq.ft. sq.ft. sq.ft. n tax cla facts who poration, p portion, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach	O ISS 1) is: the Ap bartnership ify the sign itle: (v) is ch e dismis ned.) er or man	ffices sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu	Othe BLOCK fficer one App It in di AN	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney of	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meormanager of the Application muspartnership, or a meormanager of the Applint CLEARLY TO Signer is: (i) □ Applicant name (ii) □ Officer of corp (iii) □ Officer of corp (iii) □ General partre (iv) □ Member or m (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. De (See TC600 ar If signing as fidu (vii) □ An officer, ge Enter name of en Relationship to A	sq sq sq sq E/OATH (must be no st be signed by an individi ember or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condoo ner of partnership Applican nanager of, or individual of employee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applican Applicant	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati ority must I me of entity: mat is the ger me of entity	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach	O ss 1) is: the Ap partnership ify the sign ittle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resund necked, a nessed.)	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney a ant.	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below.		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meormanager of the Application muspartnership, or a meormanager of the Application muspartnership. Year And Stranger Str	sq sq sq sq E/OATH (must be no st be signed by an individi ember or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condor ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applic Applicant	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir application prity must I me of entity: mat is the ger me of entity cluding all re	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn	O ss 1) is: the Ap partnership ify the sign ittle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a n ssed.) ager of the A r's Title s, whether o	Othe	er (describe for each floor) K LOT of a corporation, a general partner plicant, or a general partner lismissal of your application. ND check one of boxes (i) – (ized Power of Attorney ant. s form or on another. I am	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. AND		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meormanager of the Application muspartnership, or a meormanager of the Application muspartnership. Year And Stranger Str	sq sq sq sq sq E/OATH (must be no st be signed by an individi ember or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condor ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applic Applicant this entire application b	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir application prity must I me of entity: mat is the ger me of entity cluding all re oplication ar	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins nd on any	O ss 1) is: the Ap partnership ify the sign ittle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a n ssed.) ager of the A r's Title s, whether o ents, and I c	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. AND		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meormanager of the Application muspartnership, or a meormanager of the Application muspartnership, or a meormanager of the Application muspartnership. (i) □ Application muspartnership, or a meormanager of the Application muspartnership. (ii) □ Application muspartnership. (iii) □ Officer of corp. (iii) □ Officer of corp. (iii) □ General partner. (iv) □ Member or m. (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. Definition as fidu. (vii) □ Fiduciary. Definition as fidu. (vii) □ An officer, general partner name of enditionship to provide and the seconsible for the correct to the best	sq sq sq sq sq sq sq sq sq sq sq sq sq s	ft. sq.ft. sq.ft. sq.ft. sq.ft. <t< td=""><td>perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application prity must I me of entity: mat is the ger me of entity cluding all re oplication ar that such i</td><td>sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi al) Part 2. Ti this box on will b be attach neral partn elevant ins nd on any informatio</td><td>O ss 1) is: the Ap partnership ify the sign ittle:</td><td>ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. borougH por LLC is the ner may resu necked, a n ssed.) ager of the A r's Title s, whether o ents, and I c ect to verifie</td><td>Othe</td><td>er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by</td><td>sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of</td></t<>	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application prity must I me of entity: mat is the ger me of entity cluding all re oplication ar that such i	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi al) Part 2. Ti this box on will b be attach neral partn elevant ins nd on any informatio	O ss 1) is: the Ap partnership ify the sign ittle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. borougH por LLC is the ner may resu necked, a n ssed.) ager of the A r's Title s, whether o ents, and I c ect to verifie	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meor manager of the Applicant name or manager of the Applicant name (ii) □ Applicant name (ii) □ Officer of corp (iii) □ General parthr (iv) □ Member or m (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. Deficer TC600 are if signing as fidur (vii) □ An officer, general parthr and that (vii) □ An officer, general parthr and that	sq sq sq sq sq sq sq sq sq sq sq sq sq s	ft. sq.ft. sq.ft. sq.ft. sq.ft. <t< td=""><td>perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application prity must I me of entity: that is the ger me of entity cluding all re oplication ar that such i aterial fact of</td><td>sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi al) Part 2. Ti this box on will b be attach neral partn elevant ins nd on any informatio</td><td>O iss 1) is: the Ap partnership ify the sign ittle: _</td><td>ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. borougH por LLC is the ner may resu necked, a n ssed.) ager of the A r's Title s, whether o ents, and I c ect to verifie</td><td>Othe</td><td>er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information</td><td>sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of</td></t<>	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application prity must I me of entity: that is the ger me of entity cluding all re oplication ar that such i aterial fact of	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi facts who poration, p porty identi al) Part 2. Ti this box on will b be attach neral partn elevant ins nd on any informatio	O iss 1) is: the Ap partnership ify the sign ittle: _	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. borougH por LLC is the ner may resu necked, a n ssed.) ager of the A r's Title s, whether o ents, and I c ect to verifie	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meor manager of the Applicant name or manager of the ApPRINT CLEARLY TI Signer is: (i) □ Applicant name (ii) □ Officer of corp (iii) □ General partr (iv) □ Member or m (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. Definition as fidur (vii) □ Fiduciary. Definition as fidur (vii) □ An officer, gefinition as fidur (vii) □ An officer as fidur (vii) □ An officer as fidur (viii) □ An officer as fidur	sq sq sq sq sq E/OATH (must be no st be signed by an individe on the signed by an individe of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be borate Applicant or Condor ner of partnership Applican neanager of, or individual of imployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applic Applicant this entire application be accuracy of the information of my knowledge and be the making of any willful levant to the making and	ft. sq.ft. sq.ft. sq.ft. sq.ft. <t< td=""><td>perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application me of entity: hat is the ger me of entity for the ger for the ger fo</td><td>sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins nd on any nformatio on this ap</td><td>O ss 1) is: the Ap partnership ify the sign itle:</td><td>ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac</td><td>Othe</td><td>er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by</td><td>sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of</td></t<>	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application me of entity: hat is the ger me of entity for the ger for the ger fo	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins nd on any nformatio on this ap	O ss 1) is: the Ap partnership ify the sign itle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meor manager of the Applicant name or manager of the ApPRINT CLEARLY TI Signer is: (i) □ Applicant name (ii) □ Officer of corp (iii) □ General partr (iv) □ Member or m (v) □ An attorney, e Form TC244 (vi) □ Fiduciary. Definition as fidur (vii) □ Fiduciary. Definition as fidur (vii) □ An officer, gefinition as fidur (vii) □ An officer as fidur (vii) □ An officer as fidur (viii) □ An officer as fidur	sq sq sq sq sq E/OATH (must be no st be signed by an individe omber or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be borate Applicant or Condor ner of partnership Applican banager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applic Applicant this entire application be accuracy of the information of my knowledge and be the making of any willfu- levant to the making and	ft. sq.ft. sq.ft. sq.ft. sq.ft. <t< td=""><td>perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application me of entity: hat is the ger me of entity for the ger for the ger fo</td><td>sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins nd on any nformatio on this ap</td><td>O ss 1) is: the Ap partnership ify the sign itle:</td><td>ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac</td><td>Othe</td><td>er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by</td><td>sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of</td></t<>	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application me of entity: hat is the ger me of entity for the ger for the ger fo	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins nd on any nformatio on this ap	O ss 1) is: the Ap partnership ify the sign itle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a meor manager of the Application muspartnership, or a meor manager of the Application muspartnership, or a meor manager of the Applicant name (ii) □ Applicant name (ii) □ Officer of corp (iii) □ General partner (iv) □ Member or meor (v) □ An attorney, eForm TC244 (vi) □ Fiduciary. Deficer TC600 are if signing as fidue (vii) □ An officer, generated and the signing as fidue (vii) □ An officer, generated for the correct to the best New York and that of the penal law reling Signature of Signer: Unless the property	sq sq sq sq E/OATH (must be no st be signed by an individue omber or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condou ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applic Applicant this entire application be accuracy of the informatof of my knowledge and be the making of any willfu- levant to the making and y is in tax class 1, the site	ft. sq.ft. sq.ft. sq.ft. sq.ft. <t< td=""><td>perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application me of entity: hat is the ger me of entity for the ger for the ger fo</td><td>sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins nd on any nformatio on this ap</td><td>O ss 1) is: the Ap partnership ify the sign itle:</td><td>ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac</td><td>Othe</td><td>er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by</td><td>sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of</td></t<>	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If in application me of entity: hat is the ger me of entity for the ger for the ger fo	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p porty identi al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins nd on any nformatio on this ap	O ss 1) is: the Ap partnership ify the sign itle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a me or manager of the Applicant name (ii) □ Applicant name (ii) □ Officer of corp (iii) □ General parther (iv) □ Member or me (v) □ An attorney, e Form TC244 12 (vi) □ Fiduciary. De (See TC600 are If signing as fidue (vii) □ An officer, ge Enter name of enter name of enter name of enter sponsible for the correct to the best New York and that of the penal law rel Signature of Signer: Unless the property	sq sq sq sq E/OATH (must be no st be signed by an individue omber or manager of a lim pplicant, or a fiduciary or a HE NAME OF PERSON S ed in Part 2. (check this be porate Applicant or Condou ner of partnership Applican nanager of, or individual of mployee, property manag must be attached to t escribe fiduciary relationsh nd TC200 for when do ciary for a corporation, pa eneral partner, or member ntity, relationship to Applic Applicant this entire application be accuracy of the informatof of my knowledge and be the making of any willfu- levant to the making and y is in tax class 1, the site	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop a an individua s, named in med in Part 2 pplicant. (If in application ority must I me of entity: that is the ger me of entity cluding all re oplication ar that such i aterial fact of ts.	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p portion, p port 2. Ti al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins and on any informatio on this ap Date the signa	O ss 1) is: the Ap partnership ify the sign itle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. (vii) below. AND personally is true and the City of		
FLOOR 3 - SECOND FLOOR FIRST FLOOR BASEMENTS TOTAL AREA 14. SIGNATURE This application muspartnership, or a me or manager of the Applicant name (ii) □ Applicant name (ii) □ Officer of corp (iii) □ General parther (iv) □ Member or me (v) □ An attorney, e Form TC244 12 (vi) □ Fiduciary. De (See TC600 are If signing as fidue (vii) □ An officer, ge Enter name of enter name of enter name of enter sponsible for the correct to the best New York and that of the penal law rel Signature of Signer: Unless the property	sq sq sq sq sq sq sq sq sq sq sq sq sq s	ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. ft. sq.ft. sq.ft.	perty is in ledge of the C), which cor ailure to prop s an individua s, named in med in Part 2 pplicant. (If ir applicati ority must I me of entity that is the ger me of entity cluding all re oplication ar that such i aterial fact of ts.	sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. 1 tax cla facts who poration, p portion, p port 2. Ti al) Part 2. Ti 2. Title: this box on will b be attach neral partn elevant ins and on any informatio on this ap Date the signa	O ss 1) is: the Ap partnership ify the sign itle:	ffices sq.ft. sq.ft. sq.ft. sq.ft. sq.ft. BOROUGH por LLC is the ner may resu necked, a method ssed.) ager of the A r's Title s, whether o ents, and I c ect to verific or any attac	Othe	er (describe for each floor) K LOT of a corporation, a general p plicant, or a general partner lismissal of your application. ND check <u>one</u> of boxes (i) – (ized Power of Attorney ant. s form or on another. I am t that <u>all</u> such information n, is being relied upon by	sq.ft. sq.ft. sq.ft. sq.ft. oartner of a or member (vii) below. AND personally is true and the City of provisions		