



**CERTIFICATE OF CONTINUING ELIGIBILITY FOR COMMERCIAL REVITALIZATION/
EXPANSION ABATEMENT AND COMMERCIAL RENT TAX SPECIAL REDUCTION**

Mail to: NYC Department of Finance, Exemptions Unit, 59 Maiden Lane, 22nd Floor, New York, NY 10038

**DATE
STAMP**

INSTRUCTIONS: A Certificate of Continuing Eligibility must be filed annually, on or before July 1st. Failure to timely file this form may result in revocation of benefits. For further information contact Finance at commercialexemptions@finance.nyc.gov

THIS CERTIFICATE MUST BE COMPLETED IN FULL BY THE TENANT

Certificate Type: Property Tax Abatement Reduction CRT Special Reduction

SECTION A: APPLICANT INFORMATION

1. Application Number: _____ 2. Borough: _____ Block: _____ Lot: _____

3. Property Address: _____ 4. Zip Code: _____
NUMBER AND STREET

5. Tenant's Name: _____ 6. Tenant's Telephone No.: _____
PRINT FIRST NAME PRINT LAST NAME

6. Tenant's Employer Identification Number: -

7. Tenant's email address: _____

SECTION B: ELIGIBLE PREMISES INFORMATION

1. Are you using the premises for the same purposes? YES NO

2. Square footage of space leased by you in the eligible premises: _____

3. Are any areas of your space subleased or occupied by other entities? YES NO

4. If you answered "YES" to Question 3, complete the following:

a. Date when sublet commenced: ____/____/____ **MM DD YY** b. Sublet Square Footage: _____

c. Explain Relationship: _____

PLEASE ATTACH NOTIFICATION OF ELIGIBILITY LETTER

SECTION C: AGREEMENTS AND REPRESENTATIONS

*Agreements 1 through 4 refer to applicants who filed for CRT reduction benefits only
Agreements 1 through 8 refer to all other applicants*

- The applicant certifies the following: (a) The eligible premises listed above continues to be leased and occupied only by the tenant/applicant who first signed the lease (unless something different is stated on this form). (b) It is used for the commercial purpose certified by the previous Certificate of Eligibility/Abatement. (c) They shall agree to comply with the statements, agreements and representations listed on this form.
- If this building has been apportioned or merged in the past year, the applicant shall provide this information in a statement attached to this agreement.
- The applicant will provide additional information when necessary.
- The applicant will comply with any changes to the rules of the Property Abatement/CRT Special Reduction Program.
- The applicant has paid all taxes and charges due on the property.
- The applicant will comply with all sections of law and regulations relating to the construction, maintenance and operation of the property.
- Information will be plainly disclosed in an attachment to this form if the applicant or owner, officer, director or general partner currently has arson charges pending in NYC or anywhere else.
- Any new, owner(s) or persons or company now associated, and not named in the original application, will be reported in the next *Certificate of Continuing Use* filed. These companies or persons shall not have been found guilty of arson within seven years before the application. A detailed statement will be attached to this application if charges or arson are pending.

SECTION D: SIGNATURE AND NOTARIZATIONS

THIS CERTIFICATE OF CONTINUING ELIGIBILITY MUST BE SIGNED AND NOTARIZED BY BOTH THE OWNER AND THE TENANT

OWNER

STATE OF NEW YORK }
 COUNTY OF _____ } SS:

_____, being duly sworn, says that (s)he is the _____ of the above named owner, that the statements contained in this certificate of continuing use are true and (s)he makes this application to the Department of Finance to have the eligible premises named above abated from taxation as provided by law.

Subscribed and sworn to before me this _____ day
 of _____ 20 _____

 SIGNATURE OF OWNER OR OFFICER

 NOTARY PUBLIC STAMP OR SEAL:

TENANTS

STATE OF NEW YORK }
 COUNTY OF _____ } SS:

_____, being duly sworn, says that (s)he is the _____ of the above named tenant, **that there are presently _____ persons (number of employees) employed**
OF EMPLOYEES IS REQUIRED

in the eligible premises, that the statements contained in this certificate of continuing use are true and (s)he makes this application to the Department of Finance to have the eligible premises named above abated from taxation as provided by law.

Subscribed and sworn to before me this _____ day
 of _____ 20 _____

 SIGNATURE OF OWNER OR OFFICER

 NOTARY PUBLIC STAMP OR SEAL:

FAILURE TO TIMELY FILE THIS FORM MAY RESULT IN REVOCATION OF BENEFITS