



# COMMERCIAL REVITALIZATION PROGRAM INSTRUCTIONS

## FOR REAL PROPERTY TAX ABATEMENT AND/OR COMMERCIAL RENT TAX SPECIAL REDUCTION

**IMPORTANT NOTE:** Applications MUST be filed with a non-refundable \$500 filing fee within 180 days of the lease commencement date

### PROGRAM OVERVIEW

The Commercial Revitalization Program consists of several component benefits designed to increase tenant occupancy while also reducing building obsolescence. Two major benefits that require the completion of this application are the Real Property Tax Abatement and the Commercial Rent Tax Special Reduction. These benefits are available to nonresidential or mixed-use premises located in the abatement zone and meeting the eligibility requirements.

### ELIGIBLE AREA IN LOWER MANHATTAN

The eligible area in lower Manhattan, called the abatement zone, is generally defined as the area bounded by Murray Street and Frankfort Street on the north, South Street on the east, Battery Place on the south and West Street on the west.

### REAL PROPERTY TAX ABATEMENT & LENGTH OF BENEFIT

The Real Property Tax Abatement Program provides either a three or five year benefit. For the five-year benefit, the abatement in the first three years is limited to \$2.50 per square foot of the property tax, (based on the percentage of area occupied by the tenant in the eligible premises). In the fourth and fifth years of the abatement period, the benefit will equal two-thirds and one-third respectively, of the initial tax abatement. For the three-year benefit, the abatement is limited to \$2.50 per square foot in the first year. In the second and third years of the abatement period, the benefit will equal two-thirds and one-third respectively, of the initial tax abatement.

### LEASE TERMS AND MINIMUM EXPENDITURES

In order to be eligible for the abatement program, the lease on the premises must meet the minimum lease requirement corresponding to the length of the benefit. **Sublets are not permitted.**

**LEASE TERMS** - The minimum lease term required to be eligible for the abatement and special reduction programs is based upon the number of persons employed in the eligible premises sixty days following the rent commencement date. If one hundred and twenty five or fewer persons will be employed in the subject space, the minimum lease term required for the premises is three or five years. If more than one hundred and twenty five persons will be employed in the subject space, the minimum lease term required is ten years.

**MINIMUM EXPENDITURES** - Expenditure requirements are a minimum of five dollars per square foot for all premises requiring a lease term of at least three or five years. Expenditures of at least ten or thirty-five dollars per square foot depending on lease type are required for premises requiring a lease term of at least ten years.

### ADDITIONAL BENEFITS

Four additional benefits beyond the scope of this application are the Lower Manhattan Energy Program (LMEP), the Residential Conversion Tax Exemption Program (421G), and the Industrial and Commercial Incentive Program (ICIP). For further information about these programs, see #5 under "Filing Instructions" on page D of these instructions.

### COMMERCIAL RENT TAX CHANGES

The existing CRT special reduction for Lower Manhattan has been liberalized for certain leases that begin on or after July 1, 2005. Also, a provision addressing proration was added.

For additional information, see page B of these instructions.

### PROGRAM RESTRICTIONS

The law prohibits:

- X benefits to companies that move from the other boroughs to lower Manhattan;
- X a second abatement benefit for the same company, unless it is for additional space;
- X benefits for subtenants, and
- X benefits for applications not filed within 180 days of lease commencement date.

### PROGRAM QUALIFICATIONS

**THE FOLLOWING IS INTENDED TO SERVE ONLY AS A GUIDE IN YOUR DETERMINING YOUR ELIGIBILITY FOR ABATEMENT. ALL SUBMITTED APPLICATIONS ARE SUBJECT TO REVIEW IN ACCORDANCE WITH SECTION 499 OF THE NYS REAL PROPERTY TAX LAW.**

- The premises must be located in an eligible building in the abatement zone.
- The premises must be used for offices or retail stores.
- The lease must be a "new", "renewal" or "expansion" lease.
- The required lease terms must be for a minimum of three, five or ten years, depending on the number of employees.
- Required expenditures must be a minimum of 5, 10, or 35 dollars per square foot of net leasable space, depending on the lease type and number of employees.
- Common area expenditures are only acceptable if: (a) made no more than three years prior to lease commencement, and (b) made within 6 months of lease commencement, and (c) not attributable to any other application for benefits under this program.
- File the application with the \$500 application fee after the lease execution date. **A completed application must be filed within one hundred and eighty days of the lease commencement date, including all required original signatures.** The final filing date is September 27, 2018 (180 days after the program's authorizing legislation is scheduled to sunset).
- The lease on the premises must commence prior to March 31, 2018.
- Within sixty days of rent commencement, the applicant must provide evidence regarding expenditures and the number of employees working in the eligible premises. Renewal lease applicants must provide employee proof within sixty days of rent commencement and must provide expenditure proof within fourteen months of lease commencement.
- File a Certificate of Continuing Eligibility before July 1 of each year that an abatement is in effect for the premises. Failure to timely file will result in the revocation of benefits. Additional information is available online at [nyc.gov/finance](http://nyc.gov/finance).
- Benefit period begins the first day of the month following the rent commencement date and ends no later than sixty months thereafter. A benefit period may end no later than March 31, 2024.
- This application must be completed by both the property owner and the tenant. A separate application must be submitted for each individual property and lease.
- A tenant may only receive a single abatement benefit under a new lease. Any subsequent benefit would be based on the net increase in tenancy square footage.

### IMPORTANT NOTE

**A completed application must be filed with a nonrefundable \$500 application fee and all required signatures within one hundred and eighty days of the lease commencement date. By statute, no extensions to the filing deadline are permitted. The application will be denied if not timely filed. Payment should be by money order or certified check made payable to: NYC Department of Finance.**

## **COMMERCIAL RENT TAX**

The Commercial Rent Tax (CRT) Special Reduction is a thirty-six or sixty month benefit. In the sixty month benefit, the special reduction is equal to the base rent for the base year. (The base year is the first twelve months.) For the second and third twelve month periods, the special reduction is equal to the lesser of the base rent for the base year or the base rent for each such twelve month period. For the fourth and fifth twelve month periods, the special reduction is equal to two-thirds and one-third, respectively, of the lesser of the base year rent or the base rent of such twelve month period. For the thirty-six month benefit, the special reduction is equal to the base rent for the base year. For the second and third twelve month periods, the special reduction is equal to two-thirds and one-third, respectively, of the lesser of the base rent for the base year or the base rent of such twelve month period.

Tenants in a *non-government owned building* must apply for real estate tax abatement benefits in order to receive CRT benefits. A tenant who receives a Certificate of Abatement from Real Estate Tax will automatically be eligible for the CRT special reduction.

Tenants who have leased space in a *government owned building* may still qualify for the CRT Special Reduction benefit. The requirements for such applications are the same as for the real estate tax abatement program except that the expenditure and owner requirements need not be met. Qualifying tenants in a government owned building will receive a Certificate of Eligibility for Commercial Rent Tax Benefits.

For purposes of applying the special reduction, the base rent for the base year shall, where necessary to determine the amount of the special reduction allowable with respect to any number of months falling within a tax period, be prorated by dividing the base rent for the base year by twelve and multiplying the result by such number of months.

### **LEASES ON AND AFTER JULY 1, 2005**

Effective August 30, 2005, the Commercial Rent Tax reduction program is expanded for those taxpayers who are eligible for the Commercial Revitalization Program benefits to include more buildings and to provide a greater base rent reduction as follows:

- ◆ The new law expands the program to include buildings south of Canal Street that received their certificate of occupancy after 1975.
- ◆ The new law provides for a base rent reduction for the first five years of the lease equal to the lesser of the first year's rent or 100% of the rent paid for the period.
- ◆ This expansion is available for leases but not for subleases, having a term of at least five years beginning between 7/1/2005 and 6/30/2018.

Tenants receiving either a Certificate of Abatement from Real Estate Tax, or a Certificate of Eligibility for Commercial Rent Tax Benefits will be required to attach the certificate and a Commercial Rent Tax Special Reduction Compliance Certification Form to any CRT return in order to claim the special reduction.

If applying for only CRT benefits, **in a government owned building**, complete the following:

- ◆ Section I .....in its entirety
- ◆ Section II .....questions 3, 4, 5, 6, 7 and 8
- ◆ Section III-A.....questions 1, 2, 3 and 4a through 4e
- ◆ Section III-B.....in its entirety
- ◆ Section III-E.....questions 1 and 2
- ◆ Section IV.....questions 1, 2, 3, 4, 5 and 6.

From the Agreements and Affidavit sections on page 4 you may **delete the following**:

- ◆ Agreements 6c, 8, 9 and 10
- ◆ Affidavit for owner/applicant

If applying for only CRT benefits in a non-government building, the applicant must complete the entire form and meet the same requirements that would be necessary when completing a CRP abatement application.

## **PROGRAM DEFINITIONS**

The purpose of these definitions is to serve as a broad explanation to help applicants complete the application. These definitions are not intended to serve as legal definitions. For legal definitions, refer to the relevant statutes and/or promulgated rules.

**ABATEMENT ZONE** - The area in the borough of Manhattan beginning at the intersection of West Street and Murray Street; running easterly along the center line of Murray Street, connecting with the center line of Frankfort Street and running easterly along the center lines of Frankfort and Dover Streets to the intersection of Dover Street and South Street; running southerly along the center line of South Street to Peter Minuit Plaza; connecting through Peter Minuit Plaza and running northwesterly along the center line of State Street to the intersection of State Street and Battery Place; running westerly along the center line of Battery Place to the intersection of Battery Place and West Street; and running northerly along the center line of West Street to the intersection of West Street and Murray Street.

**AGGREGATE FLOOR AREA** - The sum of the gross area of a building measured from the exterior.

**APPLICANT** - If filing for tax abatement benefits-the tenant and landlord. If filing for CRT benefits in a government owned building-the tenant.

**ELIGIBLE BUILDING** - A non-residential or mixed use building that is located in the abatement zone which was legally occupiable prior to January 1, 1975. For abatement purposes, the building may not be government owned. Individual condominium units in eligible buildings are considered separate eligible buildings.

**ELIGIBLE PREMISES** - Premises located in an eligible building which are occupied or used as offices or retail space.

**ELIGIBILITY PERIOD** - The period from April 1, 1995 to March 31, 2018. In order for the lease to be eligible, the lease commencement date must be within this period.

### **LEASES**

**Expansion lease** - A lease executed for an eligible (expansion) premises where the lessor already occupies premises in an eligible building under a lease that will not expire during the eligibility period.

**New lease** - A lease:

- a) with a tenant who is relocating or expanding to eligible premises
  - 1) from Manhattan; north of abatement zone and south of the center line of 96th Street, or any area outside the city of NY
  - 2) from an eligible building whose lease will expire during the eligibility period; or
  - 3) from a premises in the abatement zone which is not an eligible building; or
  - 4) from a building in the abatement zone that the tenant owns; or
- b) with a tenant who does not occupy any premises immediately prior to executing a lease for eligible premises;

**Renewal lease** - A lease executed during the eligibility period for the continued use of all or part of a premises in an eligible building, or all or part of such premises and additional premises in such eligible building which had been leased by the same lessor under a lease expiring during the eligibility period.

**MIXED USE BUILDING** - A building used for both residential and commercial purposes with more than twenty-five per cent of the building being used for commercial, community facility or accessory purposes.

**SUBTENANT** - An entity whose right to occupy and use the eligible premises is not derived from a lease with the landlord. A subtenant also includes licensees or other similar entities. Such space is not eligible for abatement benefits or the CRT Special Reduction.

**TENANT** - Any entity (including any successors in interest) who executes a lease with the landlord for the right to occupy or use the eligible premises and does so as per the lease agreement.

**TENANT'S PERCENTAGE SHARE** - The percentage of a building's aggregate floor area allocated to the eligible premises. In the case of an expansion tenant, the share should be calculated as the percentage of the building's floor area allocated solely to the expansion premises. This figure must be listed in the lease and lease abstract.

# APPLICATION INSTRUCTIONS

## SECTION I - SITE INFORMATION

1. Enter the complete address of the premises for which the applicants are filing for an abatement.
2. Enter the floor(s) and room number(s) of the premises. If additional space is needed, attach a separate sheet. If the application is being filed for entire floors in the building, indicate this by writing "entire floor" next to the floor number.
3. Enter the borough, block and lot of the eligible premises.
4. Check the correct box. Describe the specific proposed use for the premises, such as medical office, bank branch or computer service.
5. If the premises are located in a government-owned building, check the box and see the Commercial Rent Tax Special Reduction instructions above. Although the applicant is not eligible for an abatement, the applicant may still be eligible for a Commercial Rent Tax Special Reduction.
6. Enter the company mission. If additional space is needed, attach a separate sheet.

## SECTION II - OWNER & TENANT INFORMATION

### OWNER

1. Enter complete name, address, telephone number and fax number.
2. If the owner is being represented, enter the title, complete name, firm name, address, telephone number and fax number of the representative.
3. If an application has been filed for any portion of the eligible premises, check "yes" and enter the application number. Otherwise, check "no."

### TENANT

4. Enter complete name, address, telephone number, fax number.
5. Enter the Employer Identification Number. If none is available, enter the tenant's Social Security Number.
6. If the tenant is being represented, enter the title, complete name, firm name, address, telephone number and fax number of the representative.
7. Check the correct box and indicate the application number and address of premises for which benefits were received.
8. Check the correct box. Refer to definitions under "subtenant" on page D for an explanation.
9. Check the correct box. For purposes of this question, "related" means a relationship that would call in to question the arms length nature of an ordinary lease. Such relationships include, but are not limited to, relatives and business partners. If the applicant answered "yes", describe the relationship in the space provided.

## SECTION III-A - LEASE GENERAL INFORMATION

**LINE 1** - Check the correct box. For purposes of this question, "related" business means similar business. For example, if the tenant did business as ABC Accountants and is now doing business as XYZ Accountants, this would be considered a similar business.

**LINE 2** - If the premises are located in the abatement zone, check all the boxes relating to the tenant's business addresses within one year prior to the lease execution date for the eligible premises. Then go to line 3.

**LINE 3** - Follow the application directions for line 3.

**LINE 4** - Enter the information pertaining to the eligible premises only.

- (a) the date that the lease was signed by the tenant and landlord for the eligible premises.
- (b) the date set forth on the lease that the lease term begins.
- (c) the date set forth on the lease on which the obligation to pay basic fixed rent shall begin.
- (d) the date that the lease ends for the eligible premises.
- (e) the number of people expected to be employed in the eligible premises sixty days after the date in line 4c.
- (f) the percentage of the building's aggregate floor area allocated to the tenant as listed in the lease. (See "definitions" on page D)
- (g) the gross floor area for the **eligible building**

**LINE 5** - Check the correct box. If any portion of the expenditures used to meet the work letter requirements of this application includes common area space, check "yes." Otherwise, check "no."

**LINE 6** - Enter the dollar amount of common area expenditures listed in the work letter.

**LINE 7** - Multiply the amount in line 6 by the percentage listed in line 4f. Enter the calculated amount.

**LINE 8** - Enter the Annual Base Rent.

## SECTION III-B - LEASE TYPE

Check the correct box and go to the section indicated. Refer to the definitions under "lease" on page D to determine the lease type.

**SECTION III-C - NEW LEASE INFORMATION**

**LINE 1** - Enter the square foot area of leased space in the eligible premises.

**LINE 2**

- (a) Enter the expenditures allocated to the leased space in the eligible premises. Do not include expenditures for common areas.
- (b) Divide the amount in line 2a by the square feet listed in line 1. Enter the calculated amount.
- (c) Enter the amount listed in Section III-A, line 6.
- (d) Divide the amount in line 2c by the square feet listed in line 1. Enter the calculated amount.
- (e) Enter the sum of lines 2b and 2d.

**SECTION III-D - RENEWAL LEASE INFORMATION**

**LINE 1** - Enter the square foot area of the **renewed** lease space.

**LINE 2**

- (a) Enter the expenditures allocated to the renewed lease space. Do not include expenditures to common areas.
- (b) Divide the amount in line 2a by the square feet listed in line 1. Enter the calculated amount.
- (c) Enter the amount listed in Section III-A, line 6 which is being included in the expenditure calculation for renewed space. If the renewal tenant has executed a lease for additional space in the same building, the applicant may wish to divide the common area expenditures between the two spaces. At no time may the sum of common area expenditures of the renewed and additional space equal more than the amount on Section III-A, line 6.
- (d) Divide the amount in line 2c by the square feet listed in line 1. Enter the calculated amount.
- (e) Enter the sum of lines 2b and 2d.

**LINE 3** - If the renewal tenant executes a lease for additional space in the same building as the renewal lease, check "yes." Otherwise, check "no."

**LINE 4** - Enter the square foot area of the **additional** leased space.

**LINE 5**

- (a) Enter the expenditures to the additional leased space. Do not include expenditures to common areas.
- (b) Divide the amount in line 5a by the square feet listed in line 4. Enter the calculated amount.
- (c) Enter the amount listed in Section III-A, line 6 which is being included in the expenditure calculation for renewed space. If the renewal tenant has executed a lease for additional space in the same building, the applicant may wish to divide the common area expenditures between the two spaces. At no time may the sum of common area expenditures of the renewed and additional space equal more than the amount on Section III-A, line 6.
- (d) Divide the amount in line 5c by the square feet listed in line 4. Enter the calculated amount.
- (e) Enter the sum of lines 5b and 5d.

**SECTION III-E - EXPANSION LEASE INFORMATION**

**LINE 1** - If the expansion premises are located in the same building as the currently occupied premises, check "yes." Otherwise, check "no."

**LINE 2** - If you answered "yes" to this question, you are not eligible as an expansion lease applicant. In order to be eligible the lease term for the currently occupied premises must end *no earlier than* the expiration date of the initial lease term of the expansion premises.

**LINE 3** - Enter the square foot area of leased expansion space.

**LINE 4**

- (a) Enter the expenditures allocated to the expansion lease space. Do not include expenditures to common areas.
- (b) Divide the amount in line 4a by the square feet listed in line 3. Enter the calculated amount.
- (c) Enter the amount listed in Section III-A, line 6.
- (d) Divide the amount listed in line 4c by the square feet listed in line 3. Enter the calculated amount.
- (e) Enter the sum of lines 4b and 4d.

**SECTION IV - LEASE ABSTRACT**

This required information must be taken directly from the executed lease for the eligible premises. Please include the executed lease for the eligible premises with this application.

**FILING INSTRUCTIONS**

1. After reading the instructions, complete the application form.
2. After reading the Agreements and Representations, the owner and tenant or their representatives must sign, date and notarize the application's affidavit.
3. File by certified mail or in person at:

**NYC Department of Finance  
CRP/CEP Exemptions Unit  
59 Maiden Lane, 22nd Floor  
New York, NY 10038**

4. For questions and further information about this application and abatement program, visit [nyc.gov/contactpropexemptions](http://nyc.gov/contactpropexemptions).
5. For information regarding the following programs, call:
  - Commercial Rent Tax .....[nyc.gov/contactfinance](http://nyc.gov/contactfinance)
  - Industrial and Commercial Incentive Prgm .....[nyc.gov/contactfinance](http://nyc.gov/contactfinance)
  - Lower Manhattan Energy Program .....(212) 513-6345
  - Residential Conversion Tax Exemption Program...(212) 863-5185
  - Con Edison Business Incentive Rate:.....(212) 312-3773



# COMMERCIAL REVITALIZATION PROGRAM APPLICATION

FOR REAL PROPERTY TAX ABATEMENT AND/OR COMMERCIAL RENT TAX SPECIAL REDUCTION

A nonrefundable \$500 filing fee, by certified check or money order, payable to the NYC Department of Finance must be submitted with this completed application. Failure to file the application within 180 days of lease commencement will result in the denial of benefits.

Type or print all information

CRT ONLY

### SECTION I - SITE INFORMATION (see instructions)

1. Site Address (number and street):	3. Borough:
2. Site Identifier (floor and/or room number) (If additional space is needed, attach separate sheet):	Block:
	Lot:
4. Proposed use of space: <input type="checkbox"/> Office <input type="checkbox"/> Retail <input type="checkbox"/> Other. Describe:	5. If premises are located in a government-owned building, check box and see instructions. <input type="checkbox"/>
6. Provide your company's mission:	

DATE  
STAMP

OFFICE USE ONLY  
Application Number:

### SECTION II - OWNER AND TENANT INFORMATION (see instructions)

1. Name of owner:				Telephone number: ( )	
Owner's address (number and street):				Fax number: ( )	
City, State and Zip Code:				Email Address:	
2. Owner's representative (If a representative is designated below, correspondence will be sent only to the representative): <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.				Telephone number: ( )	
Firm's name:				Fax number: ( )	
Firm's address (number and street):	City:	State:	Zip Code:	Email Address:	
3. Has an application been made previously on the eligible premises? <input type="checkbox"/> Yes. Give application number: _____ <input type="checkbox"/> No					
4. Name of tenant:				Telephone number: ( )	
Tenant's address (number and street):				Fax number: ( )	
City, State and Zip Code:				Email Address:	
5. Enter Employer Identification Number of tenant:	<input type="text"/>	-	<input type="text"/>	or	Social Security Number of tenant:
	<input type="text"/>		<input type="text"/>		<input type="text"/>
6. Tenant's representative (If a representative is designated below, correspondence will be sent only to the representative): <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.				Telephone number: ( )	
Firm's name:				Fax number: ( )	
Firm's address (number and street):	City:	State:	Zip Code:	Email Address:	
7. Has the tenant previously received a benefit pursuant to this program? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Application Number:			Address and Floor:		
8. Is this a sublease? <input type="checkbox"/> Yes <input type="checkbox"/> No					
9. Are the parties (tenant, sublessee, owner, etc.) to this lease related? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," describe relationship below.					
_____					
_____					

**SECTION III - LEASE INFORMATION (see instructions)**

**SECTION III-A GENERAL INFORMATION**

1. Did this business or a related business owned by the tenant operate, lease or occupy space within one year prior to the lease execution date for the eligible premises?  Yes  No: If "No", go to line 4.

2. Check all boxes relating to the tenant's *prior* business address(es), then go to line 3:

- A. Properties located in the abatement zone. **Please attach the lease for this subject tenancy.**
- B. Properties located in Manhattan north of the center line of 96th Street or in the boroughs of the Bronx, Brooklyn, Queens or Staten Island
- C. Properties located in Manhattan, outside of the abatement zone, but south of the center line of 96th Street
- D. Properties located outside the City of New York

3. In the space provided, list the following information based on the box(es) checked in line 2. Attach separate sheet, if necessary. Retail bank branches and chain stores must complete line 3 *only* if box 2A was checked and branches are located in the same borough.

**If this box was checked . . . . . List this information for the one year period indicated in line 1 in the space provided.**

- 2A . . . . . the box checked, all sites in the abatement zone previously occupied, lease commencement and expiration dates for all such properties. Also include the lease for that subject tenancy.
- 2B . . . . . the box checked, all sites in Manhattan above 96th Street or in the boroughs of the Bronx, Brooklyn, Queens or Staten Island previously occupied, lease expiration dates for all such properties
- 2C . . . . . the box checked, all sites in Manhattan, outside of the abatement zone, but south of the center line of 96th Street
- 2D and no . . . . . the box checked, location nearest the City of New York that was occupied by the tenant. Otherwise go to line 4.  
*other boxes*

BOX CHECKED	SITE (FULL ADDRESS AND ROOM NUMBER)	COMMENCEMENT DATE	EXPIRATION DATE
_____	_____	____/____/____	____/____/____
_____	_____	____/____/____	____/____/____
_____	_____	____/____/____	____/____/____
_____	_____	____/____/____	____/____/____
_____	_____	____/____/____	____/____/____

4. Enter the following information **as it pertains to the eligible premises:**

- a. Lease execution date : \_\_\_\_/\_\_\_\_/\_\_\_\_
- b. Lease commencement date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- c. Rent commencement date : \_\_\_\_/\_\_\_\_/\_\_\_\_
- d. Lease expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- e. Anticipated number of employees sixty days after the rent commencement date: \_\_\_\_\_
- f. Tenant's percentage share: \_\_\_\_\_%
- g. Aggregate floor area of the **eligible building**: \_\_\_\_\_ sq. ft.

5. Is any portion of the tenant's work letter attributable to the common areas of the building?  Yes: continue with line 6  No: go to Question 8

6. Value of expenditures in common areas of the eligible *building* : \$ \_\_\_\_\_

7. Value of common area expenses allocable to the eligible *premises*: \$ \_\_\_\_\_

8. Annual Base Rent: \$ \_\_\_\_\_

**SECTION III-B LEASE TYPE**

Check *one* box that describes the lease type for the eligible premises. For descriptions of each type of lease, refer to Definitions on page D.

- New - go to Section III-C       Renewal - go to Section III-D       Expansion - go to Section III-E

**SECTION III-C NEW LEASE INFORMATION (Complete the following and then go to Section IV)**

1. Area of leased space in eligible premises: \_\_\_\_\_ square feet
2. Enter the work letter expenditures allocated to:
  - a. leased space in eligible premises: \$ \_\_\_\_\_
  - b. per square foot: \$ \_\_\_\_\_
  - c. common areas in eligible building: \$ \_\_\_\_\_
  - d. per square foot: \$ \_\_\_\_\_
  - e. total expenditures per square foot (add lines 2b and 2d): ..... \$ \_\_\_\_\_

**SECTION III-D RENEWAL LEASE INFORMATION (Complete the following and then go to Section IV)**

1. Area of **renewed** leased space: \_\_\_\_\_ square feet
2. Enter the work letter expenditures allocated to:
  - a. renewed leased space in eligible premises: \$ \_\_\_\_\_
  - b. per square foot: \$ \_\_\_\_\_
  - c. common areas in eligible building: \$ \_\_\_\_\_
  - d. per square foot: \$ \_\_\_\_\_
  - e. total expenditures per square foot (add lines 2b and 2d): ..... \$ \_\_\_\_\_
3. Is additional space leased in the eligible building?       Yes: continue with line 4       No: go to Section IV
4. Area of **additional** leased space in eligible premises: \_\_\_\_\_ square feet
5. Enter the work letter expenditures allocated to:
  - a. additional leased space in eligible building: \$ \_\_\_\_\_
  - b. per square foot: \$ \_\_\_\_\_
  - c. common areas in eligible building: \$ \_\_\_\_\_
  - d. per square foot: \$ \_\_\_\_\_
  - e. total expenditures per square foot (add lines 5b and 5d): ..... \$ \_\_\_\_\_

**SECTION III-E EXPANSION LEASE INFORMATION (Complete the following and then go to Section IV)**

1. Is the expansion premises located in the same building as the currently occupied premises?
 

Yes: continue with line 2       No: go to line 3
2. Will the lease term for the premises currently occupied end before the expiration date of the initial lease term of the expansion premises?       Yes: ineligible       No: continue with line 3
3. Area of leased space in the eligible building used by expansion tenant: \_\_\_\_\_ square feet
4. Enter the work letter expenditures allocated to:
  - a. expansion lease in eligible building: \$ \_\_\_\_\_
  - b. per square foot: \$ \_\_\_\_\_
  - c. common areas in eligible building: \$ \_\_\_\_\_
  - d. per square foot: \$ \_\_\_\_\_
  - e. total expenditures per square foot (add lines 4b and 4d): ..... \$ \_\_\_\_\_

**SECTION IV - LEASE ABSTRACT INFORMATION (see instructions)**

**THE FOLLOWING INFORMATION MUST BE TAKEN DIRECTLY FROM THE EXECUTED LEASE FOR THE ELIGIBLE PREMISES. PLEASE INCLUDE THE EXECUTED LEASE FOR THE ELIGIBLE PREMISES.**

1. Borough: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_
2. Floor number: \_\_\_\_\_ Unit number: \_\_\_\_\_
3. Lease execution date: \_\_\_\_/\_\_\_\_/\_\_\_\_
4. Lease commencement date: \_\_\_\_/\_\_\_\_/\_\_\_\_
5. Rent commencement date: \_\_\_\_/\_\_\_\_/\_\_\_\_
6. Lease expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_
7. Tenant's percentage share: \_\_\_\_\_%
8. Description of work to improve eligible premises, including estimate of value of improvements. Attach separate addenda.
9. Description of work to improve common areas, including an estimate of value of improvements. Attach separate addenda.

**- AGREEMENTS AND REPRESENTATIONS -**

The undersigned agree and represent that:

1. S/he has authority to make this application on behalf of the tenant/applicant or owner/applicant.
2. He or she has personal knowledge or information sufficient to make a materially correct response to the questions asked in this application form, and that he or she knows or believes all matters stated herein to be true.
3. The applicant and its employees and agents will comply with all provisions of law and rules relating to the program.
4. The applicant has paid the application fee and will pay all other fees and penalties payable under the rules promulgated by the Department of Finance.
5. The applicant will comply with all applicable provisions of law and rules relating to the construction, maintenance and operation of buildings.
6. The Department of Finance may deny, reduce, suspend, revoke, or terminate any benefits under this program, if the recipient:
  - a) fails to comply with the requirements of this program or
  - b) knowingly misstates or omits information in the application or
  - c) is discovered to have building, fire or air pollution control code violations on the subject property
7. The applicant(s) will submit to the jurisdiction of the Department over any determination of eligibility or noncompliance under the program and will submit any claim under the program to administrative review as provided in the rules before seeking any other remedy.
8. Within seven years immediately preceding the application, neither the applicants nor any person having a substantial interest in the eligible premises, nor any officer, director, or general partner or such person was

finally adjudicated by a court of competent jurisdiction to be guilty of arson, or was an officer, director or general partner of any such entity at the time such person was finally adjudicated to have violated the law.

9. If any charges are pending alleging violation of arson law in any jurisdiction against the applicants, any person having a substantial interest in the premises, or any officer, director, general partner or such person, the applicant will set forth such charges in a statement attached to these agreements.
10. The lease for the eligible premises contains the following provisions. A statement in at least twelve point type:
  - a) of the tenant's percentage share;
  - b) informing the tenant that:
    - 1) an application for abatement of real property taxes will be made for the premises;
    - 2) the rent including amounts payable by the tenant for real property taxes will accurately reflect any abatement of real property taxes;
    - 3) at least \$5, \$10 or \$35 per square foot in the abatement zone must be spent on improvements to the premises and the common areas, the amount being dependent upon the length of the lease, lease type and number of employees.
    - 4) all abatements granted will be revoked if, during the benefit period, real estate taxes, water or sewer charges or other lienable charges are unpaid for more than one year, unless such delinquent amounts are paid as provided in the relevant law.
11. The lease for the eligible premises does not provide an option to terminate the lease prior to the initial lease term except as provided for in the applicable law.

**- AFFIDAVIT -**

STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_

SS: \_\_\_\_\_

\_\_\_\_\_, *being duly sworn, says under penalty of perjury that he/she is the owner/applicant or the \_\_\_\_\_ of the owner/applicant(s), that the statements contained in this application, including any attachments to this application, are true to his/her knowledge.*

Signature of OWNER OR REPRESENTATIVE: \_\_\_\_\_

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Affix  
official stamp or  
seal here:

\_\_\_\_\_  
Notary Public

**- AFFIDAVIT -**

STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_

SS: \_\_\_\_\_

\_\_\_\_\_, *being duly sworn, says under penalty of perjury that he/she is the tenant/applicant or the \_\_\_\_\_ of the tenant/applicant(s), that the statements contained in this application, including any attachments to this application, are true to his/her knowledge.*

Signature of TENANT OR REPRESENTATIVE: \_\_\_\_\_

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Affix  
official stamp or  
seal here:

\_\_\_\_\_  
Notary Public



# PROOF OF EMPLOYMENT

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

## APPLICANT INFORMATION

- 1. Application Number: \_\_\_\_\_
- 2. Borough: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_
- 3. Tenant's Name: \_\_\_\_\_
- 4. Tenant's Telephone Number: \_\_\_\_\_
- 5. Property Address: \_\_\_\_\_  
NUMBER AND STREET
- 6. Floor/Room Number: \_\_\_\_\_
- 7. Zip Code: \_\_\_\_\_
- 8. Lease Commencement Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- 9. Rent Commencement Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

## EMPLOYEE INFORMATION

- 1. List the number of persons employed or who will be employed in the eligible premises indicated above, as of sixty days after rent commencement: \_\_\_\_\_
- 2. List the number of persons in question #1 who are residents of New York City: \_\_\_\_\_

**NOTE: THE ANSWER TO QUESTION #2 IS NOT A DETERMINANT OF ELIGIBILITY FOR THIS PROGRAM**

## CERTIFICATION/AFFIDAVIT

STATE OF NEW YORK }  
 COUNTY OF \_\_\_\_\_ } SS

\_\_\_\_\_, being duly sworn, says that under penalty of perjury, the he/she is the applicant or the \_\_\_\_\_, an officer of the applicant, that the information contained on this document, including any attachments to this document, are true to his or her knowledge.

SIGNATURE OF APPLICANT OR OFFICER

(✓)  TENANT  OWNER

Subscribed and sworn to before me this \_\_\_\_\_ day

of \_\_\_\_\_ 20\_\_\_\_\_

NOTARY PUBLIC

STAMP OR SEAL:



# PROOF OF EXPENDITURES

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

## APPLICANT INFORMATION

1. Application Number: \_\_\_\_\_ 2. Borough: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

3. Tenant's Name: \_\_\_\_\_ 4. Tenant's Telephone Number: \_\_\_\_\_

5. Lease Type (check one):  New  Expansion  Renewal

6. Property Address: \_\_\_\_\_ 7. Floor/Room Number: \_\_\_\_\_ 8. Zip Code: \_\_\_\_\_  
NUMBER AND STREET

9. Lease Commencement Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ 10. Rent Commencement Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## EXPENDITURE INFORMATION

For new and expansion leases, the minimum expenditure requirement in the eligible premises must be met between lease execution and two months after rent commencement.

- For renewal leases, the minimum expenditure requirement in the eligible premises must be met between lease execution and fourteen months after rent commencement.
- For CRP, the common area expenditures are only acceptable if work began and expenditures are made from 4/1/1995 through 9/27/2018. For CEP, the common area expenditures are only acceptable if work began and expenditures are made from 7/1/2000 through 6/30/2018. For Industrial/Manufacturing tenants, the common area expenditures are only acceptable if work began and expenditures are made from 7/1/2005 through 6/30/2018. However, in this case expenditures in improvements to the common area made prior to three years before the lease commencement date are not eligible.
- A copy of the invoices of your expenditures and cancelled checks must be mailed along with this form.
- Complete the worksheet below. Use additional paper if necessary.

**The Department of Finance maintains the authority to request additional information before and after receipt of certification.**

CHECK NUMBER	DATE OF CHECK	PAYER	PAYABLE TO	INVOICE NUMBER	TYPE OF WORK COMPLETED	PERIOD OF WORK COMPLETION		\$ AMOUNT
						FROM	TO	

## CERTIFICATION/AFFIDAVIT

STATE OF NEW YORK }  
 COUNTY OF \_\_\_\_\_ } SS

\_\_\_\_\_, being duly sworn, says that under penalty of perjury, the he/she is the applicant or the \_\_\_\_\_, an officer of the applicant, that the information contained on this document, including any attachments to this document, are true to his or her knowledge.

\_\_\_\_\_  
 SIGNATURE OF APPLICANT OR OFFICER

(✓)  TENANT  OWNER

Subscribed and sworn to before me this \_\_\_\_\_ day  
 of \_\_\_\_\_ 20\_\_\_\_\_

NOTARY PUBLIC

STAMP OR SEAL ➔