



**TAX COMMISSION OF THE CITY OF NEW YORK**  
**1 Centre Street, Room 2400, New York, NY 10007**

**TC135**  
**2019/20**

**NOTICE OF APPEARANCE**

COMPLETE ONE FORM FOR EACH HEARING OR CALENDAR PAGE, UNLESS YOU SUBMIT THE NOTICE OF HEARING (FORM TC30).  
 SUBMIT IT TO THE HEARING OFFICER. THE CERTIFICATION BELOW MUST BE SIGNED FOR PROPERTIES WITHOUT TC140.

**HEARING INFORMATION**

|                                |              |      |                      |                                   |
|--------------------------------|--------------|------|----------------------|-----------------------------------|
| CALENDAR PAGE/PROPERTY (B/B/L) | HEARING DATE | TIME | GROUP NUMBER, IF ANY | ASSESSMENT YEAR<br><b>2019/20</b> |
|--------------------------------|--------------|------|----------------------|-----------------------------------|

REPRESENTATIVE (AS IDENTIFIED ON CALENDAR PAGE OR HEARING NOTICE)

**PERSONS APPEARING**

Person appearing for the following borough, block(s) and lot(s): \_\_\_\_\_

Print or type name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Person appearing for the following borough, block(s) and lot(s): \_\_\_\_\_

Print or type name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Person appearing for the following borough, block(s) and lot(s): \_\_\_\_\_

Print or type name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**USE OF FORMS TC140, TC155 AND TC159 AT HEARINGS**

**FORM TC140** (*Certificate of Litigation Status*). Complete Form TC140 for all properties, unless there are no proceedings pending for any year, or the list of open proceedings on our website at [www.nyc.gov/html/taxcomm](http://www.nyc.gov/html/taxcomm) is accurate, includes only proceedings controlled by the applicant or related persons, and the representative so certifies below. Otherwise, Form TC140 must be submitted to the hearing officer conducting the hearing to obtain review of an application.

**FORM TC155** (*Request to Amend Application for Correction*). Submit Form TC155 before the hearing to change the representative named in the application or make a change in the application other than a change of a statement of fact about the property itself. You may name a different representative on a *Notice of Hearing* (Form TC30) instead of TC155.

**FORM TC159** (*Affidavit in Support of Application for Correction*). Use Form TC159 at your hearing to submit documents or to supplement factual information, unless the owner, property manager or other individual having personal knowledge of the facts appears at the hearing in person and testifies.

**REPRESENTATIVE'S CERTIFICATION REGARDING DUE DILIGENCE.** I have reviewed the applications on this calendar, and have exercised due diligence with respect to each of them, as delineated in the TC610 2019 that I have previously submitted to the Tax Commission. \_\_\_\_\_(Initial)

**REPRESENTATIVE'S CERTIFICATION REGARDING LITIGATION STATUS.** I have reviewed the list of open proceedings for all parcels on the calendar page referenced above. The list of proceedings is correct and complete to the best of my information and belief, except for the parcels listed below, for each of which Form TC140 is submitted (or attach a marked copy of the calendar page). If signed by a representative other than an attorney, litigation status is certified based on information from the attorney(s) of record or applicant.

|                     |                     |                     |                     |
|---------------------|---------------------|---------------------|---------------------|
| Borough, Block, Lot | Borough, Block, Lot | Borough, Block, Lot | Borough, Block, Lot |
| _____               | _____               | _____               | _____               |
| _____               | _____               | _____               | _____               |

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**FOR TAX COMMISSION USE**

Time of arrival \_\_\_\_\_ Hearing assigned to \_\_\_\_\_ Room \_\_\_\_\_