



CITY OF YONKERS

TAX ABATEMENT CERTIFICATE FINANCE DEPARTMENT

NAME AND MAILING ADDRESS OF CURRENT OWNER

Name _____
No. & Street _____
City _____ State _____ Zip _____

SUBJECT BUILDING:

Address _____
Tax Block _____ Lot No. _____
Name of Bank _____
Mortgage No. _____

NAME OF TENANT

APT. NO. _____ EXEMPTION DOCKET No. _____

Rent Controlled Apt. Yes _____ No _____ FROM _____

Effective Date of Lease _____ TO MONTH OF _____

No. of Years _____ TOTAL MONTHS _____ X

(A)
Rent Without
Exemption

(B)
Rent With
Exemption

(C)
Amount of
Exemption
(A minus B)

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TOTAL \$ _____

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PAGE TOTAL \$ _____

STATE OF NEW YORK
COUNTY

] s.s.:

AFFIDAVIT

I am (current owner) (president of corporate current owner) (managing partner of current owner) (managing agent) (strike inapplicable title) of the subject building, and make this affidavit to induce the City of Yonkers to reply upon my statements contained in the above Certificate and any pages annexed hereto and made part hereof to grant abatement of the real property tax on the subject building in the amount claimed.

Deponent did not charge nor collect money in excess of the amounts set forth in Item B under each tenant respectively solely by virtue of currently valid Senior Citizen Rent Increase Exemptions for the stated period; the amounts of such exemption set forth in Item C for each tenant respectively represent only the Senior Citizen Rent Increase Exemption for the period described; and deponent claims tax abatement for the total of the stated Senior Citizen Rent Increase Exemptions during the year specified for apartments listed above and on pages annexed hereto, none of which have been heretofore claimed nor recognized.

Deponent agrees to hold the City of Yonkers harmless against any claim of any prior owner or other person for tax abatement based upon such exemptions for the period covered by this Certificate.

Prior to the filing of this original Certificate with the Department of Finance, deponent was properly served with orders for Senior Citizen Rent Increase Exemptions.

The foregoing and all statements contained in the Certificate are true, correct and complete to the best of deponent's knowledge.

SWORN TO BEFORE ME THIS

_____ Day of _____ 2 _____

Signature of Person Making This Affidavit

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