



NYS BOARD OF REAL PROPERTY SERVICES

APPLICATION FOR TAX EXEMPTION OF AGRICULTURAL AND HORTICULTURAL BUILDINGS AND STRUCTURES

Read information and instructions on form RP-483-Ins

A separate application must be filed for each building and structure for which exemption is sought.

1. Name and telephone no. of owner(s)

2. Mailing address of owner(s)

Day No. () _____

Evening No. () _____

E-mail address (optional) _____

3. Location of newly constructed or reconstructed building or structure:

Street address _____

City/Town _____ Village (if any) _____

School District _____

4. Parcel identification (see tax bill or assessment roll):

Tax map number or section/block/lot _____

Parcel on which building or structure is located

5. Description of building or structure (if necessary attach plans or specifications):

a. Current use or proposed use of building or structure: _____

b. Describe any real property which was replaced or removed in connection with the construction or reconstruction of the building or structure: _____

6. Date construction or reconstruction was started: _____

Date construction or reconstruction was completed: _____

7. Cost of construction or reconstruction: _____

8. Is the building or structure, or any part thereof, used or proposed to be used for retail sale of agricultural or horticultural products? Yes No

Is the building or structure, or any part thereof, used or proposed to be used for the processing of agricultural or horticultural products other than maple syrup? Yes No

If the answer is "yes" to either of the above questions, describe in detail on a separate sheet the retail sale operation and/or the nature of the processing and what portion of the building or structure is used for such purposes.

Is the building or structure, or any part thereof, used or proposed to be used in the production of maple syrup? Yes No

9. Is the building or any portion thereof, used for residential purposes? Yes No
If the answer is "yes":

a. Are all occupants employees or the immediate families of employees who are primarily employed in connection with the operation of lands actively devoted to agricultural or horticultural use?
 Yes No

b. If any occupants are related by blood or marriage to the applicant, state the relationship: _____

c. Briefly describe the nature of the duties performed by any employee (s) who reside in the building:

10. Identification of lands actively devoted to agricultural or horticultural use:

a. Total acreage: _____

b. Is this land part of the same parcel on which the newly constructed or reconstructed building or structure is located? Yes No

If the answer is "no", identify the parcel (s) containing such land:

Tax map number or section/block/lot: _____

c. Briefly describe the agricultural or horticultural use of such land: _____

I, _____, hereby certify that the information on this application constitutes a true statement of fact to the best of my knowledge.

Date

Signature of owner(s)

SPACE BELOW FOR ASSESSOR'S USE

Date application filed: _____

Application approved: _____

Applicable taxable status date: _____

Application disapproved: _____

Assessed valuation of parcel including new construction or reconstruction: \$ _____

Assessed valuation of parcel excluding new construction or reconstruction: \$ _____

Assessed valuation of exemption granted (difference between above): \$ _____

Date

Assessor's signature