



CITY OF READING

Tax Exoneration Application Form

(PLEASE PRINT CLEARLY OR TYPE IN BLUE OR BLACK INK)

1. Name of Applicant _____

2. Mailing Address of Applicant _____

a. E Mail Address _____

3. Phone number of Applicant (day phone) _____

4. Property Interest of Applicant _____

5. Tax Assessor's Parcel Number and Legal Description of Subject Property

6. Street Address of Subject Property _____

7. City of Reading Business License No. _____

8. Zoning District of Property _____

9. Name of Property Owner _____

10. Mailing Address of Property Owner (if different from applicant)

11. Name of Contact Person or Attorney for Project (this is the single point of contact that should receive all notices, mailings, information, etc.)

12. Address of Contact Person _____

13. Phone number of Contact Person (day number) _____

14. What tax years and amounts are you seeking forgiveness for?

15. Your application will be judged against the following criteria. Please answer these questions and attach additional pages as needed.

A. Please provide the purchase price of the building and the date the property was purchased.

B. What is the assessed value of the building?

C. Was the Transfer Tax paid at settlement? If so, what was the amount of Transfer Tax paid?

D. What is the Primary use of the building and facilities?

E. What is the Secondary use of the building and facilities?

F. What other properties are owned by the applicant? (list showing assessed value and tax status)

G. Will the building or any of its facilities be leased or rented out for use by other organizations or individuals

H. What fees does the organization collect?

I. What is the organization's annual payroll?

J. Was tax exoneration approved by the County Commissioners and Reading School Board? If so please list the amount exempted and the exemption year for each agency

K. When was the exemption approved by the Assessment Board? (provide copy of application and approval form)

L. Do you have a zoning permit? If not, have you applied? (provide copy)

M. Do you have a certificate of occupancy from the City? (provide copy)

N. When was building/facility last inspected by the City? (provide copy of report)

Acknowledgement and Signature:

The undersigned hereby represents upon all of the penalties of law, for the purpose of inducing the City of City of Reading City Council to take the action herein requested, that all statements herein are true and that all work herein mentioned will be done in accordance with the Ordinances of the City of Reading and the laws of the Commonwealth of Pennsylvania.

Signature of Applicant & Date

Signature of Owner & Date
(if different from Applicant)

Printed Name of Applicant

Signature of Owner
(if different from Applicant)