

APPLICATION FOR TAX ABATEMENT

CITY OF READING, PENNSYLVANIA

CONTROL NO. _____

SECTION 1 PROPERTY INFORMATION:

County PIN _____

Address _____
STREET CITY STATE ZIP

Check all boxes that apply:

- Residential Mixed Use
 Business Vacant Land

If residential, how many units _____

SECTION 2 PROPERTY OWNERSHIP INFORMATION:

Owner _____
FIRST NAME LAST NAME M.I.

Mailing Address _____
STREET CITY STATE ZIP

Phone Number _____

SECTION 3 TAX ABATEMENT REQUEST

(Check only one box)

- Local Economic Revitalization Tax Assistance Program
 Residential Tax Abatement Program (City taxes only)

I certify that I am the owner or authorized representative of the above-described property.

SIGNATURE PRINTED NAME DATE

Any information falsely provided will result in termination of all rights to tax abatement. This form shall be submitted at the time a building permit is secured or prior to commencement of construction for projects not requiring a permit in accordance with §24-726.

DO NOT WRITE BELOW THIS LINE

To Be Completed By the Assessment Agency

City of Reading Authorization _____

Current City Assessment _____ Interim Assessment

New City Assessment _____ Regular Assessment

Increase in Assessment _____