



NEW YORK STATE DEPARTMENT OF TAXATION & FINANCE
OFFICE OF REAL PROPERTY TAX SERVICES

APPLICATION FOR TAX EXEMPTION FOR
RECONSTRUCTED OR REHABILITATED HISTORIC BARN

Read information and instructions on form RP-483-b-Ins.

A separate application must be filed for each historic barn 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 (optional) _____
3. Location of historic barn:
- 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 identification number _____
5. Description of historic barn : _____

6. Current use of historic barn : _____

7. Date reconstruction or rehabilitation was started : _____
Date reconstruction or rehabilitation was completed : _____
8. Cost of reconstruction or rehabilitation : _____
9. (a) Was original construction of historic barn wholly or partially completed before January 1, 1936?
 Yes No
- (b) Was barn originally designed and used for storing farm equipment or agricultural products,
or for housing livestock? Yes No
- (c) Is any portion of the historic barn used for residential purposes? Yes No
- (d) Has reconstruction or rehabilitation materially altered the historic appearance of the barn?
 Yes No
- (e) Has the barn received an agricultural building exemption (pursuant to section 483 of the Real
Property Tax Law) within 10 years of the date of this application? Yes No

If answer to Question 9 (a) or (b) is no or answer to Question 9 (c), (d) or (e) is yes, the barn does not qualify for exemption pursuant to section 483-b of the Real Property Tax Law.

CERTIFICATION

I, _____ thereby certify that the information on this application and any accompanying pages constitutes a true statement of facts.

Signature

Date

FOR ASSESSOR'S USE

- 1. Date application filed: _____
- 2. Applicable taxable status date: _____
- 3. Action on application: Approved Disapproved
- 4. Assessed valuation of parcel in first year of exemption: \$ _____
- 5. Increase in total assessed valuation in first year of exemption: \$ _____
- 6. Amount of exemption in first year:

	<u>Percent</u>		<u>Amount</u>
County	_____	\$	_____
City/Town	_____	\$	_____
Village	_____	\$	_____
School District	_____	\$	_____

Assessor's Signature

Date