



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

APPLICATION FOR REAL PROPERTY TAX EXEMPTION FOR
FIRST-TIME HOMEBUYERS OF NEWLY CONSTRUCTED HOMES
(Real Property Tax Law, Section 457)

(Instructions for completing this form are contained in Form RP-457-Ins)

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

Day No. () _____
Evening No. () _____
E-mail address (optional) _____

2. Mailing address of owner(s)

3. Location of property (see instructions)

Street address

School district

City/Town

Village (if any)

Property identification (see tax bill or assessment roll)

Tax map number or section/block/lot: _____

4a. Property is (check one): (i) one family house (ii) two-family house
(iii) townhouse or (iv) condominium

b. If property is other than a two-family house, is any portion leased? yes no

5. Property is newly constructed primary residential property having a purchase price of \$_____ which has never been occupied (attach purchase contract and certificate of occupancy or other proof of completion); **or**
 Property is primary residential property which has been altered, improved or reconstructed at a cost of \$_____ (attach description of improvements, written dated contract, and certificate of occupancy or other proof of completion).

6. Is the property owner occupied as the primary residence of the homebuyer? yes no

7a. Has the homebuyer or homebuyer's spouse owned a primary residential property within the three-year period preceding the date of purchase of the residence for which exemption is sought? yes no

b. Most recent previous address of homebuyer and homebuyer's spouse (if different): _____

8. Does the homebuyer or homebuyer's spouse own a vacation or investment home?
 yes no

9. Total combined income of all owners and of any owners' spouses residing on the premises \$_____ (see instructions; attach copy of Federal or State income tax return)

Certification

I/We _____ hereby certify that the information on this application and any accompanying papers constitute a true statement of fact.

Signature(s) of owner(s)

Date

FOR ASSESSOR'S USE

Date application filed: _____

Applicable taxable status date: _____

Application approved for Town/City, County, Village,
 School District purpose(s)

Application disapproved

Assessed value of exemption granted: \$ _____

First assessment roll on which exemption is to be granted: _____

Last assessment roll on which exemption is to be granted: _____

Assessor's signature

Date