



**APPLICATION FOR THE CONVERSION URBAN EXEMPTION (CUE) PROGRAM**

All applicants must submit a signed copy of this certification and attached application, along with required supporting documents. **Incomplete applications cannot be processed.**

**APPLICATION INSTRUCTIONS:**

Submit the following to the Bureau of Business and Housing Development (BHD):

- The below certification of affordable housing requirements, MWBE goals, and workforce goals;
- NYS Application for Real Property Tax Exemption for Residential-Commercial Urban Exemption Program
- Proforma projected out over 12 years including anticipated rents
- Sources and uses

**APPLICANT:**

Individual Name of Applicant(s): \_\_\_\_\_

Name of Development Company (Project Specific): \_\_\_\_\_

Street Address of Development Company: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Federal Tax ID #: \_\_\_\_\_ - \_\_\_\_\_ Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**PROJECT:**

Address of proposed project: \_\_\_\_\_

Tax map Parcel Number: \_\_\_\_\_

**CERTIFICATION:**

Approval of the CUE exemption will oblige Applicant to fulfill the following community benefit goals. The undersigned hereby certifies, on behalf of the Applicant, as follows (please check each to indicate agreement):

- Minority and Women-Owned Business Enterprise (MWBE) goal of 30%. MWBE goal shall be 30% of the tax savings (*City assistance*) as calculated by the City Assessor. A utilization plan shall be submitted to the City Compliance Officer for approval prior to construction commencement, and monthly compliance reporting and monitoring will be required during the construction period;
- Workforce goals of 20% minority workers, 6.9% female workers, and 25% city of Rochester resident. Monthly compliance reporting and monitoring will be required during the construction period;
- Twenty percent (20%) of any proposed residential units will be affordable to households earning no more than 60% of the area median income (AMI) for the twelve (12) years of the CUE exemption period. Annual compliance monitoring and reporting will be required for the length of the CUE exemption period. The City and Applicant will execute a Community Benefits Agreement prior to the start of the CUE exemption period; and
- The Applicant is aware that failure to fulfill the above community benefit goals will result in revocation of the CUE exemption.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Your Name and Title - Please Print)





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

**APPLICATION FOR REAL PROPERTY TAX  
EXEMPTION FOR RESIDENTIAL-COMMERCIAL URBAN EXEMPTION PROGRAM  
(Real Property Tax Law, Section 485-a)**

(Instructions for completing this form are contained in Form RP-485-a-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 \_\_\_\_\_
- 4. General description of property for which exemption is sought (if necessary, attach plans or specifications): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- 5. Use of Property: \_\_\_\_\_
- 6. Describe alteration, installation or improvement made to convert the non-residential property to mixed-use: \_\_\_\_\_  
 \_\_\_\_\_
- 7. Cost of alteration, installation or improvement: \_\_\_\_\_
- 8. Date construction of alteration, installation or improvement was commenced: \_\_\_\_\_  
 \_\_\_\_\_
- 9. Date completed (attach certificate of occupancy or other documentation of completion): \_\_\_\_\_  
 \_\_\_\_\_

10. Other exemptions.

a. Is the property receiving or has it ever received any other exemption from real property taxation?  
 Yes  No

b. If yes, what exemption was received? \_\_\_\_\_ When? \_\_\_\_\_

Were payments in lieu of taxes made during the term of that exemption? \_\_\_\_\_

If so, attach a schedule showing the amounts and dates of such payments, and the purposes for which such payments were made (i.e., school district, general municipal, etc.). Also attach any related documentation, such as a copy of the agreement under which such payments were made.

**CERTIFICATION**

I, \_\_\_\_\_, hereby 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:

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

\_\_\_\_\_  
Assessor's signature

\_\_\_\_\_  
Date