\Box LERTA or \Box 1	RETAP APPLICATION
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PLEASE PRINT

Property Location:	
Parcel ID Number (18 digits):	
Owner:	
Owner's Mailing Address:	
Owner's Daytime Phone Number/s:	
Owner's Email Address:	
If property owned by LLC or LP, list Pri	mary Contact:
Contact's Mailing Address:	
Contact's Daytime Phone Number/s:	
Contact's Email Address:	
	s):
Permit Number/s:	Date/s of Permit:
Estimated Start Date:	Estimated Cost of Improvements:
☐ New Construction	☐ Renovations/Rehabilitation
Description of Improvements (for addition	onal space use back of sheet and/or attach supporting documents:

Property Location:	
I/We understand or certify that all of the following are	true:
(1) I/We are the legal owners of the property as stated of	on the most current deed registered in York County.
(2) All taxes and City, County, School and Improvement	nt District charges against the property are current.
(3) Any abatement will be valid only after completion of compliance with all program requirements and approva	•
(4) Once set, no changes in the Assessed Value will be	made during the program period.
(5) Applicants are accepted into the program effective. District. Applicants must complete all program require	
(6) Abatement schedules for each of the taxing entities entity does not assure acceptance by other entities.	may differ. Acceptance into the program by one taxing
	the County Assessment Office (28 E Market Street) e Street) as designated representative of the York City
Signature of Owner and Contact	Signature of Joint Owner
PRINT Name of Owner and Contact	PRINT Name of Joint Owner
Date Application Submitted	Signature of Joint Owner
	PRINT Name of Joint Owner

ATTACH ASSESSMENT NOTICE and RETURN TO:

Bureau of Permits, Planning & Zoning, 101 S George St, York, PA 17401 PH: (717) 849-2256

LERTA / ReTAP Applicant Check List

Before your property is placed on either the ReTAP or LERTA program, you are responsible for confirming that copies of all documents noted below are submitted to the York City Department of Community & Economic Development (DCED), the York City Treasurer's Office and the York County Assessment Office. Permits, Planning & Zoning will automatically forward your application, supporting documents and building permits to DCED for Initial Review.

DO NOT RETURN THIS CHECK LIST WITH YOUR APPLICATION. Use it to keep track of the dates when required documents were submitted. Keep a copy for your records!

Property Address:	Program:
	g documents submitted to Permits, Planning & Zoning urrent assessed value that meets your approval
City Treasurer – Date	County Assessment – Date
2. Copy of Building Permit/s received	from Permits, Planning & Zoning
City Treasurer – Date	County Assessment – Date
3. Copy of Preliminary Review receiv	ed from Community & Economic Development
City Treasurer – Date	County Assessment – Date
4. Copy of Certificate of Occupancy re	eceived from Permits, Planning & Zoning
DCED – Date Treas	ourer – Date County – Date
5. Approval Letter received from Com	nmunity & Economic Development
City Treasurer – Date	County Assessment – Date
6. Copy of Notice of Change in Asses	sment received from York County Assessment Office
City Treasurer – Date	County Assessment – Date

Review Summary, Zoning Exception, etc.