

General Tax Bills - 2020
 Duplicate Tax Bill

Tax Map No. 012689 16.6-2-11 Location 36 Ferrara Ave Dimensions 0.00 by 0.00 0.14 Acres		School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 311 Residential Vacant Addl Desc Lots 395-6 N Lansing Ave E-34 S-124-23		
Owner Albany County Land Bank Corp 69 State St 8thFloor Albany, NY 12207		Bill No. 031493 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 1,100 Full Market Value 1,760 Uniform Percent of Value 62.50%		
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%				
Exemptions Land Banks \$1,100				
Levy Description	Tax Levy +/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828 2.0%	0	5.577554	0.00
	0 0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014 3.4%	0	3.990239	0.00
Stanford heights fd	442,348 2.7%	0TO	2.071024	0.00
FD009				
Sewer & debt payment	0 0.0%	2.00UN	0.100000	0.20
SW004				
Tax Amount Due:				\$0.20
Payment Schedule				
Due Date	01/31/2020	02/29/2020	03/31/2020	
Penalty	0.00			
Total Due	\$0.20	\$0.20	\$0.20	



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 42 S. Kellogg Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonie
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	
Account number (as appears on tax bill) 518-407-0309		ZIP code 12304	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 16.7-2-52		Amount of taxes currently billed \$0.20	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by COLONIE for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonie who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
 Duplicate Tax Bill

Tax Map No. 012689 16.7-2-52 Location 42 South Kellogg Ave Dimensions 0.00 by 0.00 0.14 Acres		School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 311 Residential Vacant Addl Desc Lots 471-2 N-Kellogg Ave E-40 S-2-16.2			
O Albany County Land Bank Corp. w 69 State St Fl 8 n Albany, NY 12207 e r		Bill No. 031754 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 300 Full Market Value 480 Uniform Percent of Value 62.50%			
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%					
Exemptions Land Banks \$300					
Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828	2.0%	0	5.577554	0.00
	0	0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014	3.4%	0	3.990239	0.00
Stanford heights fd	442,348	2.7%	0TO	2.071024	0.00
FD009					
Sewer d debt payment	0	0.0%	2.00UN	0.100000	0.20
SW004					
Tax Amount Due:					\$0.20
Payment Schedule					
Due Date	01/31/2020	02/29/2020	03/31/2020		
Penalty	0.00				
Total Due	\$0.20	\$0.20	\$0.20		



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 15A Jones Dr	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonie
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 17.7-1-11	
Account number (as appears on tax bill)		Amount of taxes currently billed \$0.20	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by Colonie for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonie who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason):

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
 Duplicate Tax Bill

Tax Map No. 012689 17.7-1-11 Location 15A Jones Dr Dimensions 0.00 by 0.00 0.09 Acres	School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 311 Residential Vacant Addl Desc Drainage Easement
--	--

O w n e r Albany County Land Bank Corp. 69 State St Fl 8 Albany, NY 12207	Bill No. 031533 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 700 Full Market Value 1,120 Uniform Percent of Value 62.50%
--	---

Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848
 Warrant Dated 12/31/2019 \$3,719,414
 Equalization Rate 62.50%

Exemptions Land Banks \$700

Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828	2.0%	0	5.577554	0.00
	0	0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014	3.4%	0	3.990239	0.00
Maplewood fire prot. FD002	359,222	1.3%	0TO	1.774221	0.00
Sewer d debt payment SW004	0	0.0%	2.00UN	0.100000	0.20
Latham water dist WD001	1,553,814	0.0%	0TO	0.294556	0.00

Tax Amount Due: \$0.20

Payment Schedule

Due Date	01/31/2020	02/29/2020	03/31/2020		
Penalty	0.00				
Total Due	\$0.20	\$0.20	\$0.20		



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 19 Mt Riga Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonie
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	ZIP code 12110
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 31-8-1-12	
		Amount of taxes currently billed \$10.20	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by COLONIE for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonie who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
 Duplicate Tax Bill

Tax Map No. 012689 31.8-1-12 Location 19 Mt Riga Ave Dimensions 0.00 by 0.00 0.14 Acres	School Dist 012605 North Colonie Tax & Finance School District Code Prop Class 311 Residential Vacant Addl Desc Lot 47-8 N-7 E-Mt Riga Av C-24-91																																										
O w n e r Albany County Land Bank Corp. 69 State St Fl 8 Albany, NY 12207	Bill No. 031638 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 7,700 Full Market Value 12,320 Uniform Percent of Value 62.50%																																										
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%																																											
Exemptions Land Banks \$7,700																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Levy Description</th> <th style="width: 15%;">Tax Levy</th> <th style="width: 10%;">+/-</th> <th style="width: 15%;">Tax Value</th> <th style="width: 15%;">Tax Rate</th> <th style="width: 15%;">Tax Amount</th> </tr> </thead> <tbody> <tr> <td>Albany County Tax</td> <td>33,850,828</td> <td>2.0%</td> <td>0</td> <td>5.577554</td> <td>0.00</td> </tr> <tr> <td></td> <td>0</td> <td>0.0%</td> <td>0</td> <td>0.000000</td> <td>0.00</td> </tr> <tr> <td>Town of Colonie Tax</td> <td>24,312,014</td> <td>3.4%</td> <td>0</td> <td>3.990239</td> <td>0.00</td> </tr> <tr> <td>Latham fire prot. FD004</td> <td>1,509,620</td> <td>2.0%</td> <td>0TO</td> <td>1.534910</td> <td>0.00</td> </tr> <tr> <td>Sewer d debt payment SW004</td> <td>0</td> <td>0.0%</td> <td>2.00UN</td> <td>0.100000</td> <td>0.20</td> </tr> <tr> <td>Latham water dist WD001</td> <td>1,553,814</td> <td>0.0%</td> <td>0TO</td> <td>0.294556</td> <td>0.00</td> </tr> </tbody> </table>	Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount	Albany County Tax	33,850,828	2.0%	0	5.577554	0.00		0	0.0%	0	0.000000	0.00	Town of Colonie Tax	24,312,014	3.4%	0	3.990239	0.00	Latham fire prot. FD004	1,509,620	2.0%	0TO	1.534910	0.00	Sewer d debt payment SW004	0	0.0%	2.00UN	0.100000	0.20	Latham water dist WD001	1,553,814	0.0%	0TO	0.294556	0.00	
Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount																																						
Albany County Tax	33,850,828	2.0%	0	5.577554	0.00																																						
	0	0.0%	0	0.000000	0.00																																						
Town of Colonie Tax	24,312,014	3.4%	0	3.990239	0.00																																						
Latham fire prot. FD004	1,509,620	2.0%	0TO	1.534910	0.00																																						
Sewer d debt payment SW004	0	0.0%	2.00UN	0.100000	0.20																																						
Latham water dist WD001	1,553,814	0.0%	0TO	0.294556	0.00																																						
Tax Amount Due: \$0.20																																											
Payment Schedule <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Due Date</th> <th style="width: 15%;">01/31/2020</th> <th style="width: 15%;">02/29/2020</th> <th style="width: 15%;">03/31/2020</th> <th style="width: 15%;"></th> <th style="width: 15%;"></th> </tr> </thead> <tbody> <tr> <td>Penalty</td> <td>0.00</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total Due</td> <td>\$0.20</td> <td>\$0.20</td> <td>\$0.20</td> <td></td> <td></td> </tr> </tbody> </table>						Due Date	01/31/2020	02/29/2020	03/31/2020			Penalty	0.00					Total Due	\$0.20	\$0.20	\$0.20																						
Due Date	01/31/2020	02/29/2020	03/31/2020																																								
Penalty	0.00																																										
Total Due	\$0.20	\$0.20	\$0.20																																								



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 88A Arcadia Ct	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonie
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 63.10-1-63.1	
Account number (as appears on tax bill)		Amount of taxes currently billed \$0.10	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by COLONIE for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonie who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
 Duplicate Tax Bill

349

Tax Map No. 012689 53.10-1-53.1 <u>Location</u> 58A Arcadia Ct <u>Dimensions</u> 0.00 by 0.00 0.14 Acres		School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 311 Residential Vacant Addl Desc			
Owner Albany County Land Bank Corp 69 State St Fl 8 Albany, NY 12207		Bill No. 031355 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 1,400 Full Market Value 2,240 Uniform Percent of Value 62.50%			
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%					
Exemptions Land Banks \$1,400					
Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828	2.0%	0	5.577554	0.00
	0	0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014	3.4%	0	3.990239	0.00
Fuller rd fire prot. FD007	1,038,327	2.0%	0TO	1.818377	0.00
Sewer d debt payment SW004	0	0.0%	1.00UN	0.100000	0.10
Latham water dist WD001	1,553,814	0.0%	0TO	0.294556	0.00
Tax Amount Due: \$0.10					
Payment Schedule					
Due Date	01/31/2020	02/29/2020	03/31/2020		
Penalty	0.00				
Total Due	\$0.10	\$0.10	\$0.10		



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 71 Lancaster Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonie
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 16.6-3-33	
Account number (as appears on tax bill)		Amount of taxes currently billed \$0.40	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by COLONIE for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonie who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

Tax Map No. 012689 16.6-3-33 Location 71 Lancaster Ave Dimensions 0.00 by 0.00 0.55 Acres		School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 311 Residential Vacant Addl Desc Lot 535-6-7-8-9-40-1 N-64 E-69 S-35-40		
O w n e r Albany County Land Bank Corp 69 State St 8th Floor Albany, NY 12207		Bill No. 031574 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 4,400 Full Market Value 7,040 Uniform Percent of Value 62.50%		
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%				
Exemptions Land Banks \$4,400				
Levy Description	Tax Levy +/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828 2.0%	0	5.577554	0.00
	0 0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014 3.4%	0	3.990239	0.00
Stanford heights fd	442,348 2.7%	0TO	2.071024	0.00
FD009				
Sewer d debt payment	0 0.0%	4.00UN	0.100000	0.40
SW004				
Tax Amount Due:				\$0.40
Payment Schedule				
Due Date	01/31/2020	02/29/2020	03/31/2020	
Penalty	0.00		0.01	
Total Due	\$0.40	\$0.40	\$0.41	



Application for Corrected Tax Roll

RP-554
(12/19)

352

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 78 Ahi Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colosse
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	ZIP code 12206
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 42.16-1-23	
		Amount of taxes currently billed \$3,668.62	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by Colosse for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colosse who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
Duplicate Tax Bill

Tax Map No. 012689 42.15-1-23 Location 78 Ahl Ave Dimensions 0.00 by 0.00 0.21 Acres		School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 210 Single Family Addl Desc N-6 E-5 S-115-01			
O Albany County Land Bank Corp. w 69 State St Fl 8 n Albany, NY 12207 e r		Bill No. 004678 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 87,000 Full Market Value 139,200 Uniform Percent of Value 62.50%			
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%					
Exemptions					
Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828	2.0%	87,000	5.577554	485.25
	0	0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014	3.4%	87,000	3.990239	347.15
Fuller rd fire prot.	1,038,327	2.0%	87,000TO	1.818377	158.20
FD007					
Sewer a land payment	0	0.0%	5.00UN	21.865019	109.33
SW001					
Sewer oper & maint	0	0.0%	3.00UN	59.354565	178.06
SW006					
Latham water dist	1,553,814	0.0%	87,000TO	0.294556	25.63
WD001					
Unpaid water rent	0	0.0%	2,365.00	1.000000	2365.00
WD099					
Tax Amount Due: \$3,668.62					
Payment Schedule					
Due Date	01/31/2020	02/29/2020	03/31/2020		
Penalty	0.00	36.69	73.37		
Total Due	\$3,668.62	\$3,705.31	\$3,741.99		



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 23 Shepard Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonia
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 16-7-9-16	
Account number (as appears on tax bill)		Amount of taxes currently billed \$1010.81	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by COLONIE for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonia who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution

Application approved (mark an X in the applicable box): (Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason):

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
 Duplicate Tax Bill

Tax Map No. 012689 16.7-9-16 Location 23 Shepard Ave Dimensions 0.00 by 0.00 0.08 Acres	School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 210 Single Family Addl Desc Pt/4-5 N-Shepard Av E-25 S-96-99			
O w n e r Albany Co. Land Bank Corp. 112 State St Albany, NY 12207	Bill No. 025734 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 59,700 Full Market Value 95,520 Uniform Percent of Value 62.50%			
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%				
Exemptions				
Levy Description	Tax Levy +/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828 2.0%	59,700	5.577554	332.98
	0 0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014 3.4%	59,700	3.990239	238.22
Stanford heights fd	442,348 2.7%	59,700TO	2.071024	123.64
FD009				
Sewer a land payment	0 0.0%	5.00UN	21.865019	109.33
SW001				
Sewer oper & maint	0 0.0%	3.00UN	59.354565	178.06
SW006				
Latham water dist	1,553,814 0.0%	59,700TO	0.294556	17.58
WD001				
Unpaid water rent	0 0.0%	11.00	1.000000	11.00
WD099				
Tax Amount Due: \$1,010.81				
Payment Schedule				
Due Date	01/31/2020	02/29/2020	03/31/2020	
Penalty	0.00	10.11	20.22	
Total Due	\$1,010.81	\$1,020.92	\$1,031.03	



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 - General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 13 Spruce St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonie
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	ZIP code 12205
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 53-5-2-21	
		Amount of taxes currently billed \$1,369.99	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by COLONIE for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 - To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of _____ who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 - For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
Duplicate Tax Bill

Tax Map No. 012689 53.5-2-21 Location 13 Spruce St Dimensions 0.00 by 0.00 0.15 Acres		School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 210 Single Family Addl Desc Lot 359-60 N-46 E-15 S-117-05			
O w n e r		Albany Co. Land Bank Corp. 112 State St Albany, NY 12207		Bill No. 026380 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 81,000 Full Market Value 129,600 Uniform Percent of Value 62.50%	
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%					
Exemptions					
Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828	2.0%	81,000	5.577554	451.78
	0	0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014	3.4%	81,000	3.990239	323.21
Fuller rd fire prot.	1,038,327	2.0%	81,000TO	1.818377	147.29
FD007					
Sewer a land payment	0	0.0%	5.00UN	21.865019	109.33
SW001					
Sewer oper & maint	0	0.0%	3.00UN	59.354565	178.06
SW006					
Latham water dist	1,553,814	0.0%	81,000TO	0.294556	23.86
WD001					
Unpaid water rent	0	0.0%	126.46	1.000000	126.46
WD099					
Tax Amount Due: \$1,359.99					
Payment Schedule					
Due Date	01/31/2020	02/29/2020	03/31/2020		
Penalty	0.00	13.60	27.20		
Total Due	\$1,359.99	\$1,373.59	\$1,387.19		



Application for Corrected Tax Roll

RP-554
(12/19)

358

Part 1 - General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 171 Troy Schenectady Rd	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonie
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 32.1-2-5.2	
Account number (as appears on tax bill)		Amount of taxes currently billed 3421.64	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by Colonie for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 - To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonie who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 - For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
Duplicate Tax Bill

Tax Map No. 012689 32.1-2-5.2 Location 171 Troy Schdy Rd Dimensions 0.00 by 0.00 0.67 Acres		School Dist 012605 North Colonie Tax & Finance School District Code Prop Class 434 Automatic Car Wash Addl Desc N-183 E-167 C-101-72			
O ACLB Holdings, LLC w 69 State St Fl 8 n Albany, NY 12207 e r		Bill No. 027724 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 275,000 Full Market Value 440,000 Uniform Percent of Value 62.50%			
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%					
Exemptions					
Levy Description	Tax Levy	+/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828	2.0%	275,000	5.577554	1533.83
	0	0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014	3.4%	275,000	3.990239	1097.32
Latham fire prot.	1,509,620	2.0%	275,000TO	1.534910	422.10
FD004					
Sewer a land payment	0	0.0%	2.00UN	21.865019	43.73
SW001					
Sewer oper & maint	0	0.0%	3.00UN	59.354565	178.06
SW006					
Sewer a debt payment	0	0.0%	3.00UN	21.865019	65.60
SW008					
Latham water dist	1,553,814	0.0%	275,000TO	0.294556	81.00
WD001					
Tax Amount Due: \$3,421.64					
Payment Schedule					
Due Date	01/31/2020	02/29/2020	03/31/2020		
Penalty	0.00	34.22	68.43		
Total Due	\$3,421.64	\$3,455.86	\$3,490.07		



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 - General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 102 Shepard Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Colonic
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 16.8-1-44	
Account number (as appears on tax bill)		Amount of taxes currently billed 43.73	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by COLONIE for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 - To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Colonic who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 - For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____

General Tax Bills - 2020
 Duplicate Tax Bill

Tax Map No. 012689 16.8-1-44 Location 62 Shepard Ave Dimensions 0.00 by 0.00 0.09 Acres		School Dist 012601 South Colonie Tax & Finance School District Code Prop Class 312 RES Vacant Land Addl Desc Lot 58 N-66 E-64 S-47-18		
O Albany County Land Bank Corp. W 69 State St Fl 8 n Albany, NY 12207 e r		Bill No. 031732 Roll Section 0 Account No. Mortgage NO. Bank Code 000 Assessed Value 7,600 Full Market Value 12,160 Uniform Percent of Value 62.50%		
Fiscal Year 01/01/2020-12/31/2020 Estimated State Aid \$91,269,848 Warrant Dated 12/31/2019 \$3,719,414 Equalization Rate 62.50%				
Exemptions Land Banks \$7,600				
Levy Description	Tax Levy +/-	Tax Value	Tax Rate	Tax Amount
Albany County Tax	33,850,828 2.0%	0	5.577554	0.00
	0 0.0%	0	0.000000	0.00
Town of Colonie Tax	24,312,014 3.4%	0	3.990239	0.00
Stanford heights fd	442,348 2.7%	OTO	2.071024	0.00
FD009				
Sewer & land payment	0 0.0%	2.00UN	21.865019	43.73
SW001				
Latham water dist	1,553,814 0.0%	OTO	0.294556	0.00
WD001				
Tax Amount Due:				\$43.73
Payment Schedule				
Due Date	01/31/2020	02/29/2020	03/31/2020	
Penalty	0.00	0.44	0.87	
Total Due	\$43.73	\$44.17	\$44.60	



Application for Corrected Tax Roll

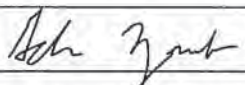
RP-554
(12/19)

362

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners ACLB Holdings LLC			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 2638 SR 145	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Rensselaerville
Daytime contact number 5184070309	Evening contact number	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 181.-2-18	
Account number (as appears on tax bill) 000016		Amount of taxes currently billed 2,327.47	
Reasons for requesting a correction to tax roll: ACLB Holdings LLC is a wholly owned subsidiary of Albany County Land Bank Corporation. Effective 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date.			

I hereby request a correction of tax levied by Town of Rensselaerville for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant 	Date 03-31-2020
---	--------------------

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 3/31/2020	Period of warrant for collection of taxes 01/01/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official 	Date 4/1/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Rensselaerville who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------

Collection: Town & County 2020

Fiscal Year Start: 1/1/2020

Fiscal Year End: 12/31/2020

Warrant Date: 12/31/2019

Total Tax Due (minus penalties & interest) \$2,281.83

Tax Bill #	SWIS	Tax Map #	Status
000016	013600	181.-2-18	Original Bill
Address	Municipality	School	
2638 SR 145	Town of Rensselaerville	Middleburgh Central	

Owners

ACLB Holdings, LLC
69 State St Fl 8th
Albany, NY 12207

Property Information

Roll Section: 1
Property Class: Restaurant
Lot Size: 11.00

Assessment Information

Full Market Value: 246140.00
Total Assessed Value: 140300.00
Uniform %: 57.00

Description	Tax Levy	Percent Change	Taxable Value	Rate	Tax Amount
Town	392003	5.1000	140300.000	2.87836700	\$403.83
Highway 1	479861	-14.5000	140300.000	3.52348400	\$494.34
Highway 2,3,4	315622	45.1000	140300.000	2.31752300	\$325.15
County	832707	4.1000	140300.000	6.21113700	\$871.42
Preston hollow fire	63182	3.6000	140300.000	1.33350800	\$187.09

Total Taxes: \$2,281.83

FULL PAYMENT OPTION

From:	To:	Tax Amount	Penalty	Notice Fee	Total Due
Jan 01	Jan 31, 2020	\$2,281.83	\$0.00	\$0.00	\$2,281.83
Feb 01	Feb 29, 2020	\$2,281.83	\$22.82	\$0.00	\$2,304.65
Mar 01	Mar 31, 2020	\$2,281.83	\$45.64	\$0.00	\$2,327.47

Estimated State Aid - Type	Amount
County	91269848.00

Mail Payments To:

Victoria H. Kraker
Town Clerk/Tax Collector
87 Barger Road Medusa, NY 12120



Application for Corrected Tax Roll

RP-554
(12/19)

364

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) U Madison Pl	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.49-1-8	
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 428.09	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 212397	TAX MAP NUMBER 76.49-1-8
MAKE CHECKS PAYABLE TO: CITY OF ALBANY	TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035	PROPERTY INFORMATION:		
		ACCOUNT #:	31607	
		DIMENSION:	0 X 0	
		ROLL:	1	
		LOCATION:	4 Madison Pl	
		SCHOOL:	010100	
		FULL MARKET VALUE:	24,742	
		UNIFORM % OF VALUE:	97.00%	
		TOTAL ASSESSMENT:	24,000	
		TAXABLE VALUE:	24,000	
		EXEMPTION	VALUE	FULL VALUE TAX PURPOSE

PROPERTY OWNER:

Albany County Land Bank Corp
69 State St
Albany, NY 12207

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	24,000	3.614679	86.75
City Tax	58,850,000	0.5%	24,000	14.222500	341.34
TOTAL BASE TAXES DUE:					\$428.09

Date Paid Amount Paid
\$0.00

Pay By 1/31/2020 Tax Amount Interest Total Due
\$428.09 \$0.00 \$428.09

TOTAL TAX DUE: \$428.09*

*Total Amount Due: \$428.09; OR 1st Installment of \$214.05 due by 1/31/2020, and 2nd Installment of \$214.05 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 11 Jeannette St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76-61-2-29	
		Amount of taxes currently billed \$ 1312.50	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 209938	TAX MAP NUMBER 76.61-2-29

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

PROPERTY INFORMATION:

ACCOUNT #: 05429
DIMENSION: 25 X 100
ROLL: 1
LOCATION: 11 Jeannette St
SCHOOL: 010100
FULL MARKET VALUE: 93,814
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 91,000
TAXABLE VALUE: 91,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	91,000	3.614679	328.94
City Tax	58,850,000	0.5%	91,000	10.808400	983.56
TOTAL BASE TAXES DUE:					\$1,312.50

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,312.50	\$0.00	\$1,312.50

TOTAL TAX DUE: \$1,312.50*

*Total Amount Due: \$1,312.50; OR 1st Installment of \$656.25 due by 1/31/2020, and 2nd Installment of \$656.25 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

368

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 24 Jackson St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.65-6-38	
		Amount of taxes currently billed \$216.35	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 210197	TAX MAP NUMBER 65.55-6-38

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 14476
 DIMENSION: 25.25 X 128.67
 ROLL: 1
 LOCATION: 24 Judson St
 SCHOOL: 010100
 FULL MARKET VALUE: 15,464
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 15,000
 TAXABLE VALUE: 15,000

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
TOTAL BASE TAXES DUE:					\$216.35

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$216.35	\$0.00	\$216.35

TOTAL TAX DUE: \$216.35*

*Total Amount Due: \$216.35; OR 1st Installment of \$108.18 due by 1/31/2020, and 2nd Installment of \$108.18 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

370

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 24 Van Zandt St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 76.49-3-22	
Account number (as appears on tax bill)		Amount of taxes currently billed \$88.11	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 223753	TAX MAP NUMBER 76.49-3-22

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 04499
 DIMENSION: 21.38 X 46.8
 ROLL: 1
 LOCATION: 24 Van Zandt St
 SCHOOL: 010100
 FULL MARKET VALUE: 4,433
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 4,300
 TAXABLE VALUE: 4,300

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	4,300	3.614679	15.54
City Tax	58,850,000	0.5%	4,300	14.222500	61.16
Downtown bid	3	100.0%	4,300	2.654000	11.41
TOTAL BASE TAXES DUE:					\$88.11

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$88.11	\$0.00	\$88.11

TOTAL TAX DUE: \$88.11*

*Total Amount Due: \$88.11; OR 1st Installment of \$44.06 due by 1/31/2020, and 2nd Installment of \$44.06 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 27 Fulton St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.49-3-17	
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 135.25	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 207200	TAX MAP NUMBER 76.49-3-17	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 04770 DIMENSION: 24 X 50 ROLL: 1 LOCATION: 27 Fulton St SCHOOL: 010100 FULL MARKET VALUE: 6,804 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 6,600 TAXABLE VALUE: 6,600	
PROPERTY OWNER: Albany County Land Bank Corp 69 State St Albany, NY 12207					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	6,600	3.614679	23.86
City Tax	58,850,000	0.5%	6,600	14.222500	93.87
Downtown bid	3	100.0%	6,600	2.654000	17.52
TOTAL BASE TAXES DUE:					\$135.25

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$135.25	\$0.00	\$135.25

TOTAL TAX DUE: \$135.25*

*Total Amount Due: \$135.25; OR 1st Installment of \$67.63 due by 1/31/2020, and 2nd Installment of \$67.63 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

374

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 48 Bassett St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 76.65-5-11	
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 216.35	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 200644	TAX MAP NUMBER 76.65-5-11

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Albany County Land Bank
69 State St Fl 8th
Albany, NY 12207

PROPERTY INFORMATION:

ACCOUNT #: 04026
 DIMENSION: 33.07 X 63.5
 ROLL: 1
 LOCATION: 48 Bassett St
 SCHOOL: 010100
 FULL MARKET VALUE: 15,464
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 15,000
 TAXABLE VALUE: 15,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
TOTAL BASE TAXES DUE:					\$216.35

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$216.35	\$0.00	\$216.35

TOTAL TAX DUE: \$216.35*

*Total Amount Due: \$216.35; OR 1st Installment of \$108.18 due by 1/31/2020, and 2nd Installment of \$108.18 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

376

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 50 Bassett St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.65-5-10	
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 7.21	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 200645	TAX MAP NUMBER 76.65-5-10	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 04027 DIMENSION: 22.21 X 66 ROLL: 1 LOCATION: 50 Bassett St SCHOOL: 010100 FULL MARKET VALUE: 515 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 500 TAXABLE VALUE: 500	
PROPERTY OWNER: Albany County Land Bank 69 State St Fl 8th Albany, NY 12207					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	500	3.614679	1.81
City Tax	58,850,000	0.5%	500	10.808400	5.40
TOTAL BASE TAXES DUE:					\$7.21

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$7.21	\$0.00	\$7.21

TOTAL TAX DUE: \$7.21*

*Total Amount Due: \$7.21; OR 1st Installment of \$3.61 due by 1/31/2020, and 2nd Installment of \$3.61 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 52 Emmett St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.52-1-43	
Account number (as appears on tax bill)		Amount of taxes currently billed \$194.41	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 206019	TAX MAP NUMBER 65.52-1-43	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 12088 DIMENSION: 22 X 75 ROLL: 1 LOCATION: 52 Emmet St SCHOOL: 010100 FULL MARKET VALUE: 5,155 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 5,000 TAXABLE VALUE: 5,000	
PROPERTY OWNER: Albany County Land Bank Corp 69 State St Fl #8 Albany, NY 12207					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	5,000	3.614679	18.07
City Tax	58,850,000	0.5%	5,000	10.808400	54.04
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$194.41

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$194.41	\$0.00	\$194.41

TOTAL TAX DUE: \$194.41*

*Total Amount Due: \$194.41; OR 1st Installment of \$97.21 due by 1/31/2020, and 2nd Installment of \$97.21 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 59 Jackson St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.56-1-44	
Account number (as appears on tax bill)		Amount of taxes currently billed \$241.12	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 226726	TAX MAP NUMBER 65.56-1-44	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
				ACCOUNT #:	14444
				DIMENSION:	22.5 X 80
				ROLL:	8
				LOCATION:	59 Judson St
				SCHOOL:	010100
				FULL MARKET VALUE:	45,361
				UNIFORM % OF VALUE:	97.00%
				TOTAL ASSESSMENT:	44,000
				TAXABLE VALUE:	0
				EXEMPTION	VALUE
				Land Banks	44,000
				FULL VALUE	45,361 CO/CITY/SCH
				TAX PURPOSE	

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St Fl 8
Albany, NY 12207

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	0	3.614679	0.00
City Tax	58,850,000	0.5%	0	10.808400	0.00
Delinquent Water			0		241.12
TOTAL BASE TAXES DUE:					\$241.12

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$241.12	\$0.00	\$241.12

TOTAL TAX DUE: \$241.12*

*Total Amount Due: \$241.12; OR 1st Installment of \$120.56 due by 1/31/2020, and 2nd Installment of \$120.56 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 64 N. Lake Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	
Account number (as appears on tax bill)		ZIP code 12206	
Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 65-62-1-60		Amount of taxes currently billed \$823.52	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 214982	TAX MAP NUMBER 65.62-1-60

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

PROPERTY INFORMATION:

ACCOUNT #: 07831
 DIMENSION: 25.86 X 69.08
 ROLL: 1
 LOCATION: 64 N Lake Ave
 SCHOOL: 010100
 FULL MARKET VALUE: 19,485
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 18,900
 TAXABLE VALUE: 18,900

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	18,900	3.614679	68.32
City Tax	58,850,000	0.5%	18,900	14.222500	268.81
Illegal Trash			0		486.39
TOTAL BASE TAXES DUE:					\$823.52

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$823.52	\$0.00	\$823.52

TOTAL TAX DUE: \$823.52*

*Total Amount Due: \$823.52; OR 1st Installment of \$411.76 due by 1/31/2020, and 2nd Installment of \$411.76 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 68 N. Lake Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.63-3-75	
Account number (as appears on tax bill)		Amount of taxes currently billed \$1641.35	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 214985	TAX MAP NUMBER 65.63-3-75

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 14499
 DIMENSION: 24.9 X 90.38
 ROLL: 1
 LOCATION: 68 N Lake Ave
 SCHOOL: 010100
 FULL MARKET VALUE: 117,320
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 113,800
 TAXABLE VALUE: 113,800

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	113,800	3.614679	411.35
City Tax	58,850,000	0.5%	113,800	10.808400	1,230.00
TOTAL BASE TAXES DUE:					\$1,641.35

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,641.35	\$0.00	\$1,641.35

TOTAL TAX DUE: \$1,641.35*

*Total Amount Due: \$1,641.35; OR 1st Installment of \$820.68 due by 1/31/2020, and 2nd Installment of \$820.68 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 92 Henry Johnson Blvd
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 65.72-5-1
Account number (as appears on tax bill)		Amount of taxes currently billed \$288.46
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by **ALBANY** for the year(s) **2020**.
(County, city, village, etc.)

Signature of applicant *[Signature]* Date **1/24/20**

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u><i>[Signature]</i></u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of **Albany** who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____: (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 208786	TAX MAP NUMBER 65.72-5-1	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 07758 DIMENSION: 25 X 73 ROLL: 1 LOCATION: 92 Henry Johnson Blvd SCHOOL: 010100 FULL MARKET VALUE: 20,619 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 20,000 TAXABLE VALUE: 20,000	
PROPERTY OWNER: Albany County Land Bank Corp 69 State St Albany, NY 12207					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	20,000	3.614679	72.29
City Tax	58,850,000	0.5%	20,000	10.808400	216.17
TOTAL BASE TAXES DUE:					\$288.46

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$288.46	\$0.00	\$288.46

TOTAL TAX DUE: \$288.46*

*Total Amount Due: \$288.46; OR 1st Installment of \$144.23 due by 1/31/2020, and 2nd Installment of \$144.23 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 13 fourth Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.65-2-40	
Account number (as appears on tax bill)		Amount of taxes currently billed \$432.69	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 207015	TAX MAP NUMBER 76.65-2-40	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 03565 DIMENSION: 93.33 X 146 ROLL: 1 LOCATION: 123 Fourth Ave SCHOOL: 010100 FULL MARKET VALUE: 30,928 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 30,000 TAXABLE VALUE: 30,000	
PROPERTY OWNER: Albany County Land Bank Corp 69 State St Albany, NY 12207					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	30,000	3.614679	108.44
City Tax	58,850,000	0.5%	30,000	10.808400	324.25
TOTAL BASE TAXES DUE:					\$432.69

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$432.69	\$0.00	\$432.69

TOTAL TAX DUE: \$432.69*

*Total Amount Due: \$432.69; OR 1st Installment of \$216.35 due by 1/31/2020, and 2nd Installment of \$216.35 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

390

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 145 Grand St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 76.57-1-40	
Account number (as appears on tax bill)		Amount of taxes currently billed 1099.01	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____: (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 207643	TAX MAP NUMBER 76.57-1-40

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 04652
 DIMENSION: 21 X 95
 ROLL: 1
 LOCATION: 145 Grand St
 SCHOOL: 010100
 FULL MARKET VALUE: 50,515
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 49,000
 TAXABLE VALUE: 49,000

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	49,000	3.614679	177.12
City Tax	58,850,000	0.5%	49,000	10.808400	529.61
Delinquent Water			0		392.28
TOTAL BASE TAXES DUE:					\$1,099.01

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,099.01	\$0.00	\$1,099.01

TOTAL TAX DUE: \$1,099.01*

*Total Amount Due: \$1,099.01; OR 1st Installment of \$549.51 due by 1/31/2020, and 2nd Installment of \$549.51 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 199 Lark St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 66.80-3-25	
		Amount of taxes currently billed \$284.45	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/20	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 226734	TAX MAP NUMBER 65.80-3-25	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
				ACCOUNT #:	06327
				DIMENSION:	20.14 X 82.91
				ROLL:	8
				LOCATION:	199 Lark St
				SCHOOL:	010100
				FULL MARKET VALUE:	103,093
				UNIFORM % OF VALUE:	97.00%
				TOTAL ASSESSMENT:	100,000
				TAXABLE VALUE:	0
				EXEMPTION	VALUE
				Land Banks	100,000
				FULL VALUE	TAX PURPOSE
				103,093	CO/CITY/SCH

PROPERTY OWNER:

Albany County Land Bank Corp
69 State St Fl 8
Albany, NY 12207

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	0	3.614679	0.00
City Tax	58,850,000	0.5%	0	10.808400	0.00
Lark street bid	3	100.0%	100,000	2.844500	284.45
TOTAL BASE TAXES DUE:					\$284.45

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$284.45	\$0.00	\$284.45

TOTAL TAX DUE: \$284.45*

*Total Amount Due: \$284.45; OR 1st Installment of \$142.23 due by 1/31/2020, and 2nd Installment of \$142.23 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 202 Kent St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 64.44-2-47
Account number (as appears on tax bill)		Amount of taxes currently billed \$1491.69
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 210582	TAX MAP NUMBER 64.44-2-47	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
PROPERTY OWNER: Albany County Land Bank Corp 69 State St Albany, NY 12207		ACCOUNT #:		16197	
		DIMENSION:		20 X 60.42	
		ROLL:		1	
		LOCATION:		202 Kent St	
		SCHOOL:		010100	
		FULL MARKET VALUE:		91,753	
		UNIFORM % OF VALUE:		97.00%	
		TOTAL ASSESSMENT:		89,000	
		TAXABLE VALUE:		89,000	
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	89,000	3.614679	321.71
City Tax	58,850,000	0.5%	89,000	10.808400	961.95
Board Up			0		208.03

TOTAL BASE TAXES DUE: \$1,491.69

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,491.69	\$0.00	\$1,491.69

TOTAL TAX DUE: \$1,491.69*

*Total Amount Due: \$1,491.69; OR 1st Installment of \$745.85 due by 1/31/2020, and 2nd Installment of \$745.85 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 213 Sherman St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 65-63-2-24	
Account number (as appears on tax bill)		Amount of taxes currently billed \$15.87	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____: (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 221151	TAX MAP NUMBER 65.63-2-24	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 14162 DIMENSION: 20 X 70 ROLL: 1 LOCATION: 213 Sherman St SCHOOL: 010100 FULL MARKET VALUE: 1,134 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 1,100 TAXABLE VALUE: 1,100	
PROPERTY OWNER: Albany County Land Bank Corp 69 State St Albany, NY 12207					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,100	3.614679	3.98
City Tax	58,850,000	0.5%	1,100	10.808400	11.89
TOTAL BASE TAXES DUE:					\$15.87

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$15.87	\$0.00	\$15.87

TOTAL TAX DUE: \$15.87*

*Total Amount Due: \$15.87; OR 1st Installment of \$7.94 due by 1/31/2020, and 2nd Installment of \$7.94 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 206 Clinton Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	State NY
Account number (as appears on tax bill)		ZIP code 12210	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.81-2-6		Amount of taxes currently billed \$295.38	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 203309	TAX MAP NUMBER 65.81-2-6

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 09218
 DIMENSION: 22 X 90.5
 ROLL: 1
 LOCATION: 206 Clinton Ave
 SCHOOL: 010100
 FULL MARKET VALUE: 12,371
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 12,000
 TAXABLE VALUE: 12,000

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St Fl #8
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	12,000	3.614679	43.38
City Tax	58,850,000	0.5%	12,000	10.808400	129.70
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$295.38

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$295.38	\$0.00	\$295.38

TOTAL TAX DUE: \$295.38*

*Total Amount Due: \$295.38; OR 1st Installment of \$147.69 due by 1/31/2020, and 2nd Installment of \$147.69 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 219 Spruce St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 66.72-4-61	
Account number (as appears on tax bill)		Amount of taxes currently billed \$276.48	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 221638	TAX MAP NUMBER 65.72-4-61

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 08630
 DIMENSION: 50.8 X 115.13
 ROLL: 1
 LOCATION: 219 Spruce St
 SCHOOL: 010100
 FULL MARKET VALUE: 15,979
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 15,500
 TAXABLE VALUE: 15,500

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,500	3.614679	56.03
City Tax	58,850,000	0.5%	15,500	14.222500	220.45
TOTAL BASE TAXES DUE:					\$276.48

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$276.48	\$0.00	\$276.48

TOTAL TAX DUE: \$276.48*

*Total Amount Due: \$276.48; OR 1st Installment of \$138.24 due by 1/31/2020, and 2nd Installment of \$138.24 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 228 Elm St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 65.72-4-10	
Account number (as appears on tax bill)		Amount of taxes currently billed \$221.46	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848									
		BANK	BILL 205693	TAX MAP NUMBER 65.72-4-10									
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 08532 DIMENSION: 27.96 X 62 ROLL: 1 LOCATION: 228 Elk St SCHOOL: 010100 FULL MARKET VALUE: 4,124 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 4,000 TAXABLE VALUE: 4,000									
PROPERTY OWNER: ACLB HOLDINGS, LLC 69 State St Fl 8 Albany, NY 12207		<table border="1"> <thead> <tr> <th>EXEMPTION</th> <th>VALUE</th> <th>FULL VALUE</th> <th>TAX PURPOSE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE				
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE										

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	4,000	3.614679	14.46
City Tax	58,850,000	0.5%	4,000	14.222500	56.89
Delinquent Water			0		150.11
TOTAL BASE TAXES DUE:					\$221.46

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$221.46	\$0.00	\$221.46

TOTAL TAX DUE: \$221.46*

*Total Amount Due: \$221.46; OR 1st Installment of \$110.73 due by 1/31/2020, and 2nd Installment of \$110.73 plus interest due no later than 12/31/2020.

71
135



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 293 Orange St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	ZIP code 12210
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.73-2-25		Amount of taxes currently billed \$568.23	
Account number (as appears on tax bill)			
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 216490	TAX MAP NUMBER 65.73-2-25	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
PROPERTY OWNER: ACLB HOLDINGS, LLC 69 State St Fl 8 Albany, NY 12207		ACCOUNT #:		09108	
		DIMENSION:		22 X 85.5	
		ROLL:		1	
		LOCATION:		293 Orange St	
		SCHOOL:		010100	
		FULL MARKET VALUE:		25,773	
		UNIFORM % OF VALUE:		97.00%	
		TOTAL ASSESSMENT:		25,000	
		TAXABLE VALUE:		25,000	
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	25,000	3.614679	90.37
City Tax	58,850,000	0.5%	25,000	14.222500	355.56
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$568.23

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$568.23	\$0.00	\$568.23

TOTAL TAX DUE: \$568.23*

*Total Amount Due: \$568.23; OR 1st Installment of \$284.12 due by 1/31/2020, and 2nd Installment of \$284.12 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 293 Second St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	State NY
Account number (as appears on tax bill)		ZIP code 12206	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.56-2-54		Amount of taxes currently billed \$1225.96	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 220562	TAX MAP NUMBER 65.56-2-54

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

PROPERTY INFORMATION:

ACCOUNT #:	14949		
DIMENSION:	30.1 X 124		
ROLL:	1		
LOCATION:	293 Second St		
SCHOOL:	010100		
FULL MARKET VALUE:		87,629	
UNIFORM % OF VALUE:		97.00%	
TOTAL ASSESSMENT:		85,000	
TAXABLE VALUE:		85,000	
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	85,000	3.614679	307.25
City Tax	58,850,000	0.5%	85,000	10.808400	918.71
TOTAL BASE TAXES DUE:					\$1,225.96

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,225.96	\$0.00	\$1,225.96

TOTAL TAX DUE: \$1,225.96*

*Total Amount Due: \$1,225.96; OR 1st Installment of \$612.98 due by 1/31/2020, and 2nd Installment of \$612.98 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 295 Orange St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.73-2-26	
Account number (as appears on tax bill)		Amount of taxes currently billed 2968.23	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <i>[Signature]</i>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason):

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 216492	TAX MAP NUMBER 65.73-2-26

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 09109
 DIMENSION: 22.05 X 85.5
 ROLL: 1
 LOCATION: 295 Orange St
 SCHOOL: 010100
 FULL MARKET VALUE: 25,773
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 25,000
 TAXABLE VALUE: 25,000

PROPERTY OWNER:
ACLB HOLDINGS, LLC
69 State St Fl 8
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	25,000	3.614679	90.37
City Tax	58,850,000	0.5%	25,000	14.222500	355.56
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$568.23

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$568.23	\$0.00	\$568.23

TOTAL TAX DUE: \$568.23*

*Total Amount Due: \$568.23; OR 1st Installment of \$284.12 due by 1/31/2020, and 2nd Installment of \$284.12 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

410

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 311 Third St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 65.56-1-49	
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 51.51	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 226876	TAX MAP NUMBER 65.56-1-49

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 15122
 DIMENSION: 22 X 130
 ROLL: 8
 LOCATION: 311 Third St
 SCHOOL: 010100
 FULL MARKET VALUE: 10,309
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 10,000
 TAXABLE VALUE: 0

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St Fl 8
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
Land Banks	10,000	10,309	CO/CITY/SCH

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	0	3.614679	0.00
City Tax	58,850,000	0.5%	0	10.808400	0.00
Board Up			0		51.51
TOTAL BASE TAXES DUE:					\$51.51

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$51.51	\$0.00	\$51.51

TOTAL TAX DUE: \$51.51*

*Total Amount Due: \$51.51; OR 1st Installment of \$25.76 due by 1/31/2020, and 2nd Installment of \$25.76 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 344 Second St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 105.69-6-27	
Account number (as appears on tax bill)		Amount of taxes currently billed \$338.105	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 220607	TAX MAP NUMBER 65.55-6-27	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
PROPERTY OWNER: Albany County Land Bank Corp 69 State St Fl #8 Albany, NY 12207		ACCOUNT #:		14906	
		DIMENSION:		22.77 X 118.25	
		ROLL:		1	
		LOCATION:		354 Second St	
		SCHOOL:		010100	
		FULL MARKET VALUE:		15,464	
		UNIFORM % OF VALUE:		97.00%	
		TOTAL ASSESSMENT:		15,000	
		TAXABLE VALUE:		15,000	
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$338.65

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$338.65	\$0.00	\$338.65

TOTAL TAX DUE: \$338.65*

*Total Amount Due: \$338.65; OR 1st Installment of \$169.33 due by 1/31/2020, and 2nd Installment of \$169.33 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 407 First St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.55-6-61	
Account number (as appears on tax bill)		Amount of taxes currently billed \$3057.12	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 206623
		TAX MAP NUMBER 65.55-6-61	

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St Fl #8
Albany, NY 12207

PROPERTY INFORMATION:

ACCOUNT #: 14847
 DIMENSION: 23.14 X 118.25
 ROLL: 1
 LOCATION: 407 First St
 SCHOOL: 010100
 FULL MARKET VALUE: 26,804
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 26,000
 TAXABLE VALUE: 26,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	26,000	3.614679	93.98
City Tax	58,850,000	0.5%	26,000	10.808400	281.02
Delinquent Water			0		2,682.12
TOTAL BASE TAXES DUE:					\$3,057.12

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$3,057.12	\$0.00	\$3,057.12

TOTAL TAX DUE: \$3,057.12*

*Total Amount Due: \$3,057.12; OR 1st Installment of \$1,528.56 due by 1/31/2020, and 2nd Installment of \$1,528.56 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 412 Tenth St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	ZIP code 12206
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 05.47-4-14	
		Amount of taxes currently billed \$10,303.95	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : Application approved (mark an X in the applicable box): (Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 222956
		TAX MAP NUMBER 65.47-4-14

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 15062
DIMENSION: 29.69 X 127.33
ROLL: 1
LOCATION: 412 Third St
SCHOOL: 010100
FULL MARKET VALUE: 63,918
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 62,000
TAXABLE VALUE: 62,000

PROPERTY OWNER:

Albany County Land Bank Corp
69 State St Fl #8
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	62,000	3.614679	224.11
City Tax	58,850,000	0.5%	62,000	10.808400	670.12
Delinquent Water			0		9,409.72
TOTAL BASE TAXES DUE:					\$10,303.95

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$10,303.95	\$0.00	\$10,303.95

TOTAL TAX DUE: \$10,303.95*

*Total Amount Due: \$10,303.95; OR 1st Installment of \$5,151.98 due by 1/31/2020, and 2nd Installment of \$5,151.98 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

418

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 432 2116 St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 65.54-5-13	
Account number (as appears on tax bill)		Amount of taxes currently billed \$447.12	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 205778	TAX MAP NUMBER 65.54-5-13

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 14269
 DIMENSION: 28.02 X 70
 ROLL: 1
 LOCATION: 432 Elk St
 SCHOOL: 010100
 FULL MARKET VALUE: 31,959
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 31,000
 TAXABLE VALUE: 31,000

PROPERTY OWNER:
Albany County Land Bank
69 State St Fl 8th
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	31,000	3.614679	112.06
City Tax	58,850,000	0.5%	31,000	10.808400	335.06
TOTAL BASE TAXES DUE:					\$447.12

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$447.12	\$0.00	\$447.12

TOTAL TAX DUE: \$447.12*

*Total Amount Due: \$447.12; OR 1st Installment of \$223.56 due by 1/31/2020, and 2nd Installment of \$223.56 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 509 Morris St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 64.76-1-64	
Account number (as appears on tax bill)		Amount of taxes currently billed \$734.18	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 214023	TAX MAP NUMBER 64.76-1-64
MAKE CHECKS PAYABLE TO: CITY OF ALBANY	TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035	PROPERTY INFORMATION:		
		ACCOUNT #:	17704	
		DIMENSION:	25 X 103	
		ROLL:	1	
		LOCATION:	509 Morris St	
		SCHOOL:	010100	
		FULL MARKET VALUE:	77,320	
		UNIFORM % OF VALUE:	97.00%	
		TOTAL ASSESSMENT:	75,000	
		TAXABLE VALUE:	0	
		EXEMPTION	VALUE	FULL VALUE TAX PURPOSE
		TAX SALE	75,000	77,320 COUNTY/CITY

PROPERTY OWNER:

Albany County Land Bank Corp
69 STATE St Fl #8
Albany, NY 12207

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	0	3.614679	0.00
City Tax	58,850,000	0.5%	0	10.808400	0.00
Delinquent Water			0		734.18
TOTAL BASE TAXES DUE:					\$734.18

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$734.18	\$0.00	\$734.18

TOTAL TAX DUE: \$734.18*

*Total Amount Due: \$734.18; OR 1st Installment of \$367.09 due by 1/31/2020, and 2nd Installment of \$367.09 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

422

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		Location of property (street address) 524 Clinton Ave	
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		City, town, or village Albany	
City, village, or post office Albany	State NY	ZIP code 12207	State NY
Daytime contact number 518-407-0309	Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-55-4-7
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 278.51	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/2/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : Application approved (mark an X in the applicable box): (Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 226661
		TAX MAP NUMBER 65.55-4-7

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 09285
DIMENSION: 27 X 192.61
ROLL: 8
LOCATION: 524 Clinton Ave
SCHOOL: 010100
FULL MARKET VALUE: 12,371
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 12,000
TAXABLE VALUE: 0

PROPERTY OWNER:

Albany County Land Bank Corp
69 State St Fl 8
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
Land Banks	12,000	12,371	CO/CITY/SCH

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	0	3.614679	0.00
City Tax	58,850,000	0.5%	0	10.808400	0.00
Board Up			0		128.40
Delinquent Water			0		150.11

TOTAL BASE TAXES DUE: \$278.51

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$278.51	\$0.00	\$278.51

TOTAL TAX DUE: \$278.51*

*Total Amount Due: \$278.51; OR 1st Installment of \$139.26 due by 1/31/2020, and 2nd Installment of \$139.26 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 625 First St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309		State NY
Account number (as appears on tax bill)		ZIP code 12206	
Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 66.47-2-32			
Amount of taxes currently billed \$216.36			
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/2/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason):

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 206688	TAX MAP NUMBER 65.47-2-32

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Albany County Land Bank Corp
69 State St
Albany, NY 12207

PROPERTY INFORMATION:

ACCOUNT #: 13418
DIMENSION: 25 X 118.25
ROLL: 1
LOCATION: 525 First St
SCHOOL: 010100
FULL MARKET VALUE: 15,464
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 15,000
TAXABLE VALUE: 15,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
TOTAL BASE TAXES DUE:					\$216.35

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$216.35	\$0.00	\$216.35

TOTAL TAX DUE: \$216.35*

*Total Amount Due: \$216.35; OR 1st Installment of \$108.18 due by 1/31/2020, and 2nd Installment of \$108.18 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 530 Clinton Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Ausny
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 65.55-4-4	
Account number (as appears on tax bill)		Amount of taxes currently billed \$241.12	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/3/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/2/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 226662
		TAX MAP NUMBER 65.55-4-4

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 09288
DIMENSION: 27.02 X 185.29
ROLL: 8
LOCATION: 530 Clinton Ave
SCHOOL: 010100
FULL MARKET VALUE: 48,454
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 47,000
TAXABLE VALUE: 0

PROPERTY OWNER:

Albany County Land Bank Corp
69 State St Fl 8
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
Land Banks	47,000	48,454	CO/CITY/SCH

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	0	3.614679	0.00
City Tax	58,850,000	0.5%	0	10.808400	0.00
Delinquent Water			0		241.12
TOTAL BASE TAXES DUE:					\$241.12

Date Paid Amount Paid
\$0.00

Pay By 1/31/2020 Tax Amount Interest Total Due
\$241.12 \$0.00 \$241.12

TOTAL TAX DUE: \$241.12*

*Total Amount Due: \$241.12; OR 1st Installment of \$120.56 due by 1/31/2020, and 2nd Installment of \$120.56 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

428

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 573 Second St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	ZIP code 12206
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.38-2-52	
		Amount of taxes currently billed \$35,113.11	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/2/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 220739	TAX MAP NUMBER 65.38-2-52

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 13510
DIMENSION: 25.15 X 127.25
ROLL: 1
LOCATION: 573 Second St
SCHOOL: 010100
FULL MARKET VALUE: 70,103
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 68,000
TAXABLE VALUE: 57,800

PROPERTY OWNER:

Albany County Land Bank Corp
69 State St Fl #8
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
VETWAR CTS	10,200	10,515	CO/CITY/SCH

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	57,800	3.614679	208.93
City Tax	58,850,000	0.5%	57,800	10.808400	624.73
Demolition			0		34,067.25
Delinquent Water			0		212.28
TOTAL BASE TAXES DUE:					\$35,113.19

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$35,113.19	\$0.00	\$35,113.19

TOTAL TAX DUE: \$35,113.19*

*Total Amount Due: \$35,113.19; OR 1st Installment of \$17,556.60 due by 1/31/2020, and 2nd Installment of \$17,556.60 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

430

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 603 Clinton Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309		State NY
Account number (as appears on tax bill)		ZIP code 12206	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 605.55-1-45	
		Amount of taxes currently billed \$265.00	

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/2/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : Application approved (mark an X in the applicable box): (Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 203496	TAX MAP NUMBER 65.55-1-45

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 14742
DIMENSION: 22.28 X 125
ROLL: 1
LOCATION: 603 Clinton Ave
SCHOOL: 010100
FULL MARKET VALUE: 8,247
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 8,000
TAXABLE VALUE: 8,000

PROPERTY OWNER:

Albany County Land Bank Corp
69 State St
Albany, NY 12207

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	8,000	3.614679	28.92
City Tax	58,850,000	0.5%	8,000	14.222500	113.78
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$265.00

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$265.00	\$0.00	\$265.00

TOTAL TAX DUE: \$265.00*

*Total Amount Due: \$265.00; OR 1st Installment of \$132.50 due by 1/31/2020, and 2nd Installment of \$132.50 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			Location of property (street address) 33 McCarty Ave		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			City, town, or village Albany		
City, village, or post office Albany		State NY	ZIP code 12207		State NY
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 6.80-2-63.1	
Account number (as appears on tax bill)			Amount of taxes currently billed \$768.93		
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 213226
		TAX MAP NUMBER 76.80-2-53.1

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

DUKHIE MADAN S
1067 SANFORD Ave
IRVINGTON, NJ 07111

PROPERTY INFORMATION:

ACCOUNT #: 00718
DIMENSION: 36 X 75
ROLL: 1
LOCATION: 33 Mc Carty Ave
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	14.222500	21.33
Illegal Trash			0		525.36
Delinquent Water			0		216.82
TOTAL BASE TAXES DUE:					\$768.93

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$768.93	\$0.00	\$768.93

TOTAL TAX DUE: \$768.93*

*Total Amount Due: \$768.93; OR 1st Installment of \$384.47 due by 1/31/2020, and 2nd Installment of \$384.47 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554

(12/19)

434

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation					
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			Location of property (street address) 36 Osborne St		
City, village, or post office Albany		State NY	ZIP code 12207	City, town, or village Albany	
		State NY	ZIP code 12207		
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.56-2-87	
Account number (as appears on tax bill)				Amount of taxes currently billed \$140.13	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☒ Deny application ☐
Signature of official <i>[Signature]</i>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 216833	TAX MAP NUMBER 76.56-2-87

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 03101
DIMENSION: 22 X 68.52
ROLL: 1
LOCATION: 35 Osborne St
SCHOOL: 010100
FULL MARKET VALUE: 1,031
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,000
TAXABLE VALUE: 1,000

PROPERTY OWNER:

Rockowitz Morris
Attn: Dow Jr Johnnie E
PO Box 294
Schoharie, NY 12157-0294

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,000	3.614679	3.61
City Tax	58,850,000	0.5%	1,000	14.222500	14.22
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$140.13

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$140.13	\$0.00	\$140.13

TOTAL TAX DUE: \$140.13*

*Total Amount Due: \$140.13; OR 1st Installment of \$70.07 due by 1/31/2020, and 2nd Installment of \$70.07 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

436

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 35 Regent St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.71-2-27	
Account number (as appears on tax bill)		Amount of taxes currently billed \$167.84	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 218602	TAX MAP NUMBER 76.71-2-27

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
DAVIS CHRISTOPHER
2 Clinton Ave
MONTCLAIR, NJ 07042

PROPERTY INFORMATION:

ACCOUNT #: 02662
DIMENSION: 25 X 66
ROLL: 1
LOCATION: 35 Regent St
SCHOOL: 010100
FULL MARKET VALUE: 2,062
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 2,000
TAXABLE VALUE: 2,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	2,000	3.614679	7.23
City Tax	58,850,000	0.5%	2,000	10.808400	21.62
Delinquent Water			0		138.99
TOTAL BASE TAXES DUE:					\$167.84

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$167.84	\$0.00	\$167.84

TOTAL TAX DUE: \$167.84*

*Total Amount Due: \$167.84; OR 1st Installment of \$83.92 due by 1/31/2020, and 2nd Installment of \$83.92 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

438

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation					
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			Location of property (street address) 37 Osborne St		
City, village, or post office Albany		State NY	ZIP code 12207		City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		State NY	
				ZIP code 12202	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76-56-2-88			Amount of taxes currently billed \$136.72		
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ ;
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 216835	TAX MAP NUMBER 76.56-2-88

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Vice Donald H
PO Box 294
Schoharie, NY 12157

PROPERTY INFORMATION:

ACCOUNT #: 03102
DIMENSION: 22 X 68.52
ROLL: 1
LOCATION: 37 Osborne St
SCHOOL: 010100
FULL MARKET VALUE: 1,031
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,000
TAXABLE VALUE: 1,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,000	3.614679	3.61
City Tax	58,850,000	0.5%	1,000	10.808400	10.81
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$136.72

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$136.72	\$0.00	\$136.72

TOTAL TAX DUE: \$136.72*

*Total Amount Due: \$136.72; OR 1st Installment of \$68.36 due by 1/31/2020, and 2nd Installment of \$68.36 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

440

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation					
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			Location of property (street address) 40 Second Ave		
City, village, or post office Albany		State NY	ZIP code 12207		City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		State NY	ZIP code 12202
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.72-3-9			Amount of taxes currently billed 14661.52		
Account number (as appears on tax bill)					
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☒ Deny application ☐
Signature of official <i>[Signature]</i>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 220171	TAX MAP NUMBER 76.72-3-9

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 03353
 DIMENSION: 23 X 75
 ROLL: 1
 LOCATION: 40 Second Ave
 SCHOOL: 010100
 FULL MARKET VALUE: 38,144
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 37,000
 TAXABLE VALUE: 37,000

PROPERTY OWNER:

RICHTER PAUL A
40 Second Ave
Albany, NY 12202

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	37,000	3.614679	133.74
City Tax	58,850,000	0.5%	37,000	10.808400	399.91
Delinquent Water			0		127.87
TOTAL BASE TAXES DUE:					\$661.52

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$661.52	\$0.00	\$661.52

TOTAL TAX DUE: \$661.52*

*Total Amount Due: \$661.52; OR 1st Installment of \$330.76 due by 1/31/2020, and 2nd Installment of \$330.76 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 44 Second Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	State NY
Account number (as appears on tax bill)		ZIP code 12202	
Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 76.72-3-6		Amount of taxes currently billed \$140.85	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____: (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 220174
		TAX MAP NUMBER 76.72-3-6

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
DUKHIE MADAN S
1067 SANFORD Ave
IRVINGTON, NJ 07111

PROPERTY INFORMATION:

ACCOUNT #: 03356
DIMENSION: 23 X 75
ROLL: 1
LOCATION: 44 Second Ave
SCHOOL: 010100
FULL MARKET VALUE: 928
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 900
TAXABLE VALUE: 900

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	900	3.614679	3.25
City Tax	58,850,000	0.5%	900	10.808400	9.73
Delinquent Water			0		127.87
TOTAL BASE TAXES DUE:					\$140.85

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$140.85	\$0.00	\$140.85

TOTAL TAX DUE: \$140.85*

*Total Amount Due: \$140.85; OR 1st Installment of \$70.43 due by 1/31/2020, and 2nd Installment of \$70.43 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

444

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 41 Sloan St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.64-5-14	
Account number (as appears on tax bill)		Amount of taxes currently billed 160.62	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 221313	TAX MAP NUMBER 76.64-5-14

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
Davidson Dale
PO Box 2564
ALBANY, NY 12220

PROPERTY INFORMATION:

ACCOUNT #: 02764
DIMENSION: 25.25 X 125
ROLL: 1
LOCATION: 41 Sloan St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		138.99
TOTAL BASE TAXES DUE:					\$160.62

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$160.62	\$0.00	\$160.62

TOTAL TAX DUE: \$160.62*

*Total Amount Due: \$160.62; OR 1st Installment of \$80.31 due by 1/31/2020, and 2nd Installment of \$80.31 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

446

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 45 Lexington Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-64-2-20	
Account number (as appears on tax bill)		Amount of taxes currently billed \$841.34	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <i>[Signature]</i>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 211391
		TAX MAP NUMBER 65.64-2-20

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 07800
DIMENSION: 25.13 X 132
ROLL: 1
LOCATION: 45 Lexington Ave
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

PROPERTY OWNER:

SKAINE LINCOLN R
3 MCLAREN St
SARATOGA SPRINGS, NY 12866

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Illegal Trash			0		680.72
Delinquent Water			0		138.99
TOTAL BASE TAXES DUE:					\$841.34

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$841.34	\$0.00	\$841.34

TOTAL TAX DUE: \$841.34*

*Total Amount Due: \$841.34; OR 1st Installment of \$420.67 due by 1/31/2020, and 2nd Installment of \$420.67 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

448

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 33 Rapp Rd	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	State NY
Account number (as appears on tax bill)		ZIP code 12203	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 92-6-2-28		Amount of taxes currently billed \$1,251.56	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>11/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 218379	TAX MAP NUMBER 52.6-2-28

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 28806
 DIMENSION: 105 X 105
 ROLL: 1
 LOCATION: 53 Rapp Rd
 SCHOOL: 010100
 FULL MARKET VALUE: 47,732
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 46,300
 TAXABLE VALUE: 46,300

PROPERTY OWNER:

Nabors Erskine
157 Homestead Ave
Albany, NY 12203

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	46,300	3.614679	167.36
City Tax	58,850,000	0.5%	46,300	10.808400	500.43
Delinquent Water			0		583.77
TOTAL BASE TAXES DUE:					\$1,251.56

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,251.56	\$0.00	\$1,251.56

TOTAL TAX DUE: \$1,251.56*

*Total Amount Due: \$1,251.56; OR 1st Installment of \$625.78 due by 1/31/2020, and 2nd Installment of \$625.78 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 61 Odell St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76-72-3-67
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 547.21	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant 	Date 1/24/20
----------------------------	------------------------

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official 	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 216016	TAX MAP NUMBER 76.72-3-67

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 02445
DIMENSION: 18 X 75
ROLL: 1
LOCATION: 61 Odell St
SCHOOL: 010100
FULL MARKET VALUE: 31,959
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 31,000
TAXABLE VALUE: 31,000

PROPERTY OWNER:
BARRINGER THERESA
MANNING ANNETTE
140 SCHOOLHOUSE Rd
Albany, NY 12208

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	31,000	3.614679	112.06
City Tax	58,850,000	0.5%	31,000	10.808400	335.06
Delinquent Water			0		100.09
TOTAL BASE TAXES DUE:					\$547.21

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$547.21	\$0.00	\$547.21

TOTAL TAX DUE: \$547.21*

*Total Amount Due: \$547.21; OR 1st Installment of \$273.61 due by 1/31/2020, and 2nd Installment of \$273.61 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

452

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 62 Broad St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.65-3-19
Account number (as appears on tax bill)		Amount of taxes currently billed \$195.85
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of _____ who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 201699	TAX MAP NUMBER 76.65-3-19

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 02292
DIMENSION: 22.08 X 66
ROLL: 1
LOCATION: 62 Broad St
SCHOOL: 010100
FULL MARKET VALUE: 5,258
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 5,100
TAXABLE VALUE: 5,100

PROPERTY OWNER:

Syntax Services LLC
72 Van Reipen Ave #353
Jersey City, NJ 07306

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	5,100	3.614679	18.43
City Tax	58,850,000	0.5%	5,100	10.808400	55.12
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$195.85

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$195.85	\$0.00	\$195.85

TOTAL TAX DUE: \$195.85*

*Total Amount Due: \$195.85; OR 1st Installment of \$97.93 due by 1/31/2020, and 2nd Installment of \$97.93 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

454

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 71 Second Ave
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.124-5-44
Account number (as appears on tax bill)		Amount of taxes currently billed \$1916.48
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant 	Date <u>1/24/20</u>
----------------------------	------------------------

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official 	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 220186	TAX MAP NUMBER 76.64-5-44

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 03440
DIMENSION: 25 X 105
ROLL: 1
LOCATION: 71 Second Ave
SCHOOL: 010100
FULL MARKET VALUE: 3,711
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 3,600
TAXABLE VALUE: 3,600

PROPERTY OWNER:

ALBANY 69 SECOND AVE, LLC
114-73 178th St
JAMAICA, NY 11434

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	3,600	3.614679	13.01
City Tax	58,850,000	0.5%	3,600	10.808400	38.91
Delinquent Water			0		144.56
TOTAL BASE TAXES DUE:					\$196.48

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$196.48	\$0.00	\$196.48

TOTAL TAX DUE: \$196.48*

*Total Amount Due: \$196.48; OR 1st Installment of \$98.24 due by 1/31/2020, and 2nd Installment of \$98.24 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

456

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 71 Benson St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-45-2-42
Account number (as appears on tax bill)		Amount of taxes currently billed \$2749.68
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

[Signature] 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____ _____
--

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 200877	TAX MAP NUMBER 65.45-2-42

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 13134
DIMENSION: 40 X 87
ROLL: 1
LOCATION: 79 Benson St
SCHOOL: 010100
FULL MARKET VALUE: 141,237
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 137,000
TAXABLE VALUE: 137,000

PROPERTY OWNER:
SPARKS CASANDRA S
MACKAY IAN F
PO Box 872
TROY, NY 12181

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	137,000	3.614679	495.21
City Tax	58,850,000	0.5%	137,000	10.808400	1,480.75
Illegal Trash			0		532.60
Delinquent Water			0		241.12
TOTAL BASE TAXES DUE:					\$2,749.68

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$2,749.68	\$0.00	\$2,749.68

TOTAL TAX DUE: \$2,749.68*

*Total Amount Due: \$2,749.68; OR 1st Installment of \$1,374.84 due by 1/31/2020, and 2nd Installment of \$1,374.84 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

458

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 108 Ontario St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 66.46-3-85	
		Amount of taxes currently billed \$177.31	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <i>[Signature]</i>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason):

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 216253	TAX MAP NUMBER 65.46-3-85

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
108 ONTARIO STREET, LLC
912 N CROFT Ave Apt #204
LOS ANGELES, CA 90069

PROPERTY INFORMATION:

ACCOUNT #: 14557
DIMENSION: 28 X 60
ROLL: 1
LOCATION: 108 Ontario St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		155.68
TOTAL BASE TAXES DUE:					\$177.31

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$177.31	\$0.00	\$177.31

TOTAL TAX DUE: \$177.31*

*Total Amount Due: \$177.31; OR 1st Installment of \$88.66 due by 1/31/2020, and 2nd Installment of \$88.66 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 110 Alexander St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.104-2-6
Account number (as appears on tax bill)		Amount of taxes currently billed \$ 151.97
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☒ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>2/26/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 200224
		TAX MAP NUMBER 76.64-2-6

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
MASTERS CARMEN
393 CLINTON Ave
Albany, NY 12206

PROPERTY INFORMATION:

ACCOUNT #: 02945
DIMENSION: 25 X 50
ROLL: 1
LOCATION: 110 Alexander St
SCHOOL: 010100
FULL MARKET VALUE: 928
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 900
TAXABLE VALUE: 900

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	900	3.614679	3.25
City Tax	58,850,000	0.5%	900	10.808400	9.73
Delinquent Water			0		138.99

TOTAL BASE TAXES DUE: \$151.97

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$151.97	\$0.00	\$151.97

TOTAL TAX DUE: \$151.97*

*Total Amount Due: \$151.97; OR 1st Installment of \$75.99 due by 1/31/2020, and 2nd Installment of \$75.99 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation					
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			Location of property (street address) 179 Broad St		
City, village, or post office Albany		State NY	ZIP code 12207		
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76-73-4-10	
Account number (as appears on tax bill)				Amount of taxes currently billed \$179.37	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant 	Date 1/24/20
----------------------------	------------------------

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official 	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____ _____
--

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 201720	TAX MAP NUMBER 76.73-4-10

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 02347
 DIMENSION: 25 X 66
 ROLL: 1
 LOCATION: 129 Broad St
 SCHOOL: 010100
 FULL MARKET VALUE: 2,887
 UNIFORM % OF VALUE: 97.00%
 TOTAL ASSESSMENT: 2,800
 TAXABLE VALUE: 2,800

PROPERTY OWNER:

Snyder Charles
129 Broad St
Albany, NY 12202

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	2,800	3.614679	10.12
City Tax	58,850,000	0.5%	2,800	10.808400	30.26
Delinquent Water			0		138.99
TOTAL BASE TAXES DUE:					\$179.37

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$179.37	\$0.00	\$179.37

TOTAL TAX DUE: \$179.37*

*Total Amount Due: \$179.37; OR 1st Installment of \$89.69 due by 1/31/2020, and 2nd Installment of \$89.69 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 179 Sherman St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-63-5-27
Account number (as appears on tax bill)		Amount of taxes currently billed \$110.60
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 2/26/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 221128	TAX MAP NUMBER 65.63-5-27

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

INTERSTATE INVESTMENT
GROUP LLC.
PO Box 264
Gilbert, SC 29054

PROPERTY INFORMATION:

ACCOUNT #: 08506
DIMENSION: 16.5 X 165
ROLL: 1
LOCATION: 129 Sherman St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		88.97
TOTAL BASE TAXES DUE:					\$110.60

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$110.60	\$0.00	\$110.60

TOTAL TAX DUE: \$110.60*

*Total Amount Due: \$110.60; OR 1st Installment of \$55.30 due by 1/31/2020, and 2nd Installment of \$55.30 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 141 Clinton St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.72-2-72	
Account number (as appears on tax bill)		Amount of taxes currently billed \$715.88	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/2/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 203640	TAX MAP NUMBER 76.72-2-72
MAKE CHECKS PAYABLE TO: CITY OF ALBANY	TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035	PROPERTY INFORMATION:		
		ACCOUNT #:	02502	
		DIMENSION:	21.03 X 60	
		ROLL:	1	
		LOCATION:	141 Clinton St	
		SCHOOL:	010100	
		FULL MARKET VALUE:	15,464	
		UNIFORM % OF VALUE:	97.00%	
		TOTAL ASSESSMENT:	15,000	
		TAXABLE VALUE:	15,000	
		EXEMPTION	VALUE	FULL VALUE TAX PURPOSE

PROPERTY OWNER:

Thomas Mary
233 Park Ave Bsmt 2
Albany, NY 12202

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
Illegal Trash			0		262.97
Delinquent Water			0		236.56
TOTAL BASE TAXES DUE:					\$715.88

Date Paid

Amount Paid

\$0.00

Tax Amount

Interest

Total Due

Pay By 1/31/2020

\$715.88

\$0.00

\$715.88

TOTAL TAX DUE: \$715.88*

*Total Amount Due: \$715.88; OR 1st Installment of \$357.94 due by 1/31/2020, and 2nd Installment of \$357.94 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

468

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 153 Sheridan Ave
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.81-6-79
Account number (as appears on tax bill)		Amount of taxes currently billed \$51.92
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>maallo</u>	Date <u>3/2/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848									
		BANK	BILL 220966	TAX MAP NUMBER 65.81-6-79									
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 08808 DIMENSION: 24.87 X 99 ROLL: 1 LOCATION: 153 Sheridan Ave SCHOOL: 010100 FULL MARKET VALUE: 3,711 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 3,600 TAXABLE VALUE: 3,600									
PROPERTY OWNER: Johnson Estelle CHAD DUKES, EXEC 17 OLIVER St Albany, NY 12205		<table border="1"> <thead> <tr> <th>EXEMPTION</th> <th>VALUE</th> <th>FULL VALUE</th> <th>TAX PURPOSE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE				
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE										

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	3,600	3.614679	13.01
City Tax	58,850,000	0.5%	3,600	10.808400	38.91
TOTAL BASE TAXES DUE:					\$51.92

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$51.92	\$0.00	\$51.92

TOTAL TAX DUE: \$51.92*

*Total Amount Due: \$51.92; OR 1st Installment of \$25.96 due by 1/31/2020, and 2nd Installment of \$25.96 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

470

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 161 S. Hawk St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	State NY
Account number (as appears on tax bill)		ZIP code 12207	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.56-4-35		Amount of taxes currently billed \$135.69	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official 	Date <u>3/2/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 219264	TAX MAP NUMBER 76.56-4-35

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

DAVIS CHRISTOPHER
2 Clinton Ave
MONTCLAIR, NJ 07042

PROPERTY INFORMATION:

ACCOUNT #: 04980
DIMENSION: 29 X 100
ROLL: 1
LOCATION: 161 S Hawk St
SCHOOL: 010100
FULL MARKET VALUE: 1,753
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,700
TAXABLE VALUE: 1,700

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,700	3.614679	6.14
City Tax	58,850,000	0.5%	1,700	10.808400	18.37
Delinquent Water			0		111.18
TOTAL BASE TAXES DUE:					\$135.69

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$135.69	\$0.00	\$135.69

TOTAL TAX DUE: \$135.69*

*Total Amount Due: \$135.69; OR 1st Installment of \$67.85 due by 1/31/2020, and 2nd Installment of \$67.85 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

472

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 189 Second St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	State NY	
Account number (as appears on tax bill)		ZIP code 12210	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.65-2-65	
		Amount of taxes currently billed \$771.93	

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <i>[Signature]</i>	Date 3/2/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 220512	TAX MAP NUMBER 65.65-2-65

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
SKAINE LINCOLN R
3 MCCLAREN St
SARATOGA SPRINGS, NY 12866

PROPERTY INFORMATION:

ACCOUNT #: 10855
DIMENSION: 24.54 X 128
ROLL: 1
LOCATION: 185 Second St
SCHOOL: 010100
FULL MARKET VALUE: 15,464
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 15,000
TAXABLE VALUE: 15,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
Board Up			0		314.46
Delinquent Water			0		241.12
TOTAL BASE TAXES DUE:					\$771.93

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$771.93	\$0.00	\$771.93

TOTAL TAX DUE: \$771.93*

*Total Amount Due: \$771.93; OR 1st Installment of \$385.97 due by 1/31/2020, and 2nd Installment of \$385.97 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554

(12/19)

474

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 193 Colonne St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	State NY
Account number (as appears on tax bill)		ZIP code 12210	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 66.66-1-32		Amount of taxes currently billed \$38,486.04	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by Albany for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official M. Allen	Date 3/2/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 203814	TAX MAP NUMBER 65.66-1-32	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 11078 DIMENSION: 20.09 X 100 ROLL: 1 LOCATION: 193 Colonie St SCHOOL: 010100 FULL MARKET VALUE: 15,464 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 15,000 TAXABLE VALUE: 15,000	
PROPERTY OWNER: MARSHALL JA'KEEN 15 LARK St Albany, NY 12210					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
Demolition			0		37,222.50
Delinquent Water			0		1,047.19
TOTAL BASE TAXES DUE:					\$38,486.04

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$38,486.04	\$0.00	\$38,486.04

TOTAL TAX DUE: \$38,486.04*

*Total Amount Due: \$38,486.04; OR 1st Installment of \$19,243.02 due by 1/31/2020, and 2nd Installment of \$19,243.02 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554

(12/19)

476

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			Location of property (street address) 199 N. Lake Ave		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			City, town, or village Albany		
City, village, or post office Albany		State NY	ZIP code 12207		State NY
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-47-4-48	
Account number (as appears on tax bill)			Amount of taxes currently billed \$3499.84		
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official [Signature]	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____ _____
--

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848									
		BANK	BILL 215031	TAX MAP NUMBER 65.47-4-48									
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 14544 DIMENSION: 49.5 X 100 ROLL: 1 LOCATION: 199 N Lake Ave SCHOOL: 010100 FULL MARKET VALUE: 73,196 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 71,000 TAXABLE VALUE: 71,000									
PROPERTY OWNER: TESHEIRA ENVIL 235 PARK Ave SCHENECTADY, NY 12304		<table border="1"> <thead> <tr> <th>EXEMPTION</th> <th>VALUE</th> <th>FULL VALUE</th> <th>TAX PURPOSE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE				
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE										

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	71,000	3.614679	256.64
City Tax	58,850,000	0.5%	71,000	10.808400	767.40
Illegal Trash			0		2,234.68
Delinquent Water			0		241.12

TOTAL BASE TAXES DUE: \$3,499.84

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$3,499.84	\$0.00	\$3,499.84

TOTAL TAX DUE: \$3,499.84*

*Total Amount Due: \$3,499.84; OR 1st Installment of \$1,749.92 due by 1/31/2020, and 2nd Installment of \$1,749.92 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

478

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 242 Orange St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 05.81-3-3
Account number (as appears on tax bill)		Amount of taxes currently billed \$263.97
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>MAALFA</u>	Date <u>3/5/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 216469	TAX MAP NUMBER 65.81-3-3

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

Irvine James
Irvine Martha
2002 9TH St
RENSSELAER, NY 12144-1423

PROPERTY INFORMATION:

ACCOUNT #: 08953
DIMENSION: 29.95 X 44
ROLL: 1
LOCATION: 242 Orange St
SCHOOL: 010100
FULL MARKET VALUE: 1,959
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,900
TAXABLE VALUE: 1,900

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,900	3.614679	6.87
City Tax	58,850,000	0.5%	1,900	10.808400	20.54
Delinquent Water			0		236.56
TOTAL BASE TAXES DUE:					\$263.97

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$263.97	\$0.00	\$263.97

TOTAL TAX DUE: \$263.97*

*Total Amount Due: \$263.97; OR 1st Installment of \$131.99 due by 1/31/2020, and 2nd Installment of \$131.99 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation					
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 298 Second St			
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany	State NY	ZIP code 12210
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.64-6-14	
Account number (as appears on tax bill)		Amount of taxes currently billed \$1160.62			
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 220540	TAX MAP NUMBER 65.64-6-14	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 10829 DIMENSION: 25.64 X 120 ROLL: 1 LOCATION: 258 Second St SCHOOL: 010100 FULL MARKET VALUE: 1,546 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 1,500 TAXABLE VALUE: 1,500	
PROPERTY OWNER: Smith Andrew 258 Second St Albany, NY 12206					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		138.99
TOTAL BASE TAXES DUE:					\$160.62

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$160.62	\$0.00	\$160.62

TOTAL TAX DUE: \$160.62*

*Total Amount Due: \$160.62; OR 1st Installment of \$80.31 due by 1/31/2020, and 2nd Installment of \$80.31 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

482

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 259 Myrtle Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.31-1-79	
Account number (as appears on tax bill)		Amount of taxes currently billed \$1133.14	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848									
		BANK	BILL 214541	TAX MAP NUMBER 76.31-1-79									
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 19089 DIMENSION: 30 X 93.5 ROLL: 1 LOCATION: 259 Myrtle Ave SCHOOL: 010100 FULL MARKET VALUE: 69,072 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 67,000 TAXABLE VALUE: 67,000									
PROPERTY OWNER: Dumond Gerald O 259 Myrtle Ave Albany, NY 12208		<table border="1"> <thead> <tr> <th>EXEMPTION</th> <th>VALUE</th> <th>FULL VALUE</th> <th>TAX PURPOSE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE				
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE										

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	67,000	3.614679	242.18
City Tax	58,850,000	0.5%	67,000	10.808400	724.16
Delinquent Water			0		166.80
TOTAL BASE TAXES DUE:					\$1,133.14

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,133.14	\$0.00	\$1,133.14

TOTAL TAX DUE: \$1,133.14*

*Total Amount Due: \$1,133.14; OR 1st Installment of \$566.57 due by 1/31/2020, and 2nd Installment of \$566.57 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

484

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 285 Northern Blvd	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.97-2-75	
		Amount of taxes currently billed \$1467.08	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of _____ who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 215821	TAX MAP NUMBER 65.57-2-75	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
				ACCOUNT #:	10361
				DIMENSION:	49 X 108.13
				ROLL:	1
				LOCATION:	285 Northern Blvd
				SCHOOL:	010100
PROPERTY OWNER: Russell Raymond R 285 Northern Blvd Albany, NY 12210				FULL MARKET VALUE:	87,629
				UNIFORM % OF VALUE:	97.00%
				TOTAL ASSESSMENT:	85,000
				TAXABLE VALUE:	85,000
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	85,000	3.614679	307.25
City Tax	58,850,000	0.5%	85,000	10.808400	918.71
Delinquent Water			0		241.12
TOTAL BASE TAXES DUE:					\$1,467.08

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,467.08	\$0.00	\$1,467.08

TOTAL TAX DUE: \$1,467.08*

*Total Amount Due: \$1,467.08; OR 1st Installment of \$733.54 due by 1/31/2020, and 2nd Installment of \$733.54 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

486

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 311 First St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	City, town, or village Albany
Account number (as appears on tax bill) 65-96-3-45		State NY
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		ZIP code 12206
		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-96-3-45
		Amount of taxes currently billed 1697.18

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution

(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 206569
		TAX MAP NUMBER 65.56-3-45

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

Hobbs Martha
44 Lawn Ave
Albany, NY 12204

PROPERTY INFORMATION:

ACCOUNT #: 14811
DIMENSION: 28.63 X 114.5
ROLL: 1
LOCATION: 311 First St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Illegal Trash			0		474.32
Delinquent Water			0		161.23
TOTAL BASE TAXES DUE:					\$657.18

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$657.18	\$0.00	\$657.18

TOTAL TAX DUE: \$657.18*

*Total Amount Due: \$657.18; OR 1st Installment of \$328.59 due by 1/31/2020, and 2nd Installment of \$328.59 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

488

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 311 Hackett Blvd	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 79.24-2-7	
		Amount of taxes currently billed \$5,263.92	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 208174
		TAX MAP NUMBER 75.24-2-7

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 24567
DIMENSION: 78.8 X 122
ROLL: 1
LOCATION: 311 Hackett Blvd
SCHOOL: 010100
FULL MARKET VALUE: 272,165
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 264,000
TAXABLE VALUE: 264,000

PROPERTY OWNER:

Gisburne Gail A
311 Hackett Blvd
Albany, NY 12208

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	264,000	3.614679	954.28
City Tax	58,850,000	0.5%	264,000	10.808400	2,853.42
Delinquent Water			0		1,455.82
TOTAL BASE TAXES DUE:					\$5,263.52

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$5,263.52	\$0.00	\$5,263.52

TOTAL TAX DUE: \$5,263.52*

*Total Amount Due: \$5,263.52; OR 1st Installment of \$2,631.76 due by 1/31/2020, and 2nd Installment of \$2,631.76 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

490

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 313 Orange St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 66.72-6-33
Account number (as appears on tax bill)		Amount of taxes currently billed \$125.60
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/5/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____: (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 216502	TAX MAP NUMBER 65.72-6-33

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 10526
DIMENSION: 20.03 X 85
ROLL: 1
LOCATION: 313 Orange St
SCHOOL: 010100
FULL MARKET VALUE: 1,031
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,000
TAXABLE VALUE: 1,000

PROPERTY OWNER:

Syntax Services Llc
72 Van Reipen Ave #353
Jersey City, NJ 07306

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,000	3.614679	3.61
City Tax	58,850,000	0.5%	1,000	10.808400	10.81
Delinquent Water			0		111.18
TOTAL BASE TAXES DUE:					\$125.60

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$125.60	\$0.00	\$125.60

TOTAL TAX DUE: \$125.60*

*Total Amount Due: \$125.60; OR 1st Installment of \$62.80 due by 1/31/2020, and 2nd Installment of \$62.80 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

492

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 336 Clinton Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.64-3-24	
Account number (as appears on tax bill)		Amount of taxes currently billed \$1,725.52	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:

Application approved (mark an X in the applicable box):

(Insert number or date, if applicable)

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 203350	TAX MAP NUMBER 65.64-3-24

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 10598
DIMENSION: 25.74 X 90
ROLL: 1
LOCATION: 336 Clinton Ave
SCHOOL: 010100
FULL MARKET VALUE: 113,402
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 110,000
TAXABLE VALUE: 110,000

PROPERTY OWNER:

Williams Tamika
336 Clinton Ave
Albany, NY 12210

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	110,000	3.614679	397.61
City Tax	58,850,000	0.5%	110,000	10.808400	1,188.92
Delinquent Water			0		138.99
TOTAL BASE TAXES DUE:					\$1,725.52

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,725.52	\$0.00	\$1,725.52

TOTAL TAX DUE: \$1,725.52*

*Total Amount Due: \$1,725.52; OR 1st Installment of \$862.76 due by 1/31/2020, and 2nd Installment of \$862.76 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

494

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 376 Delaware Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	State NY
Account number (as appears on tax bill)		ZIP code 12209	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.61-2-45		Amount of taxes currently billed \$998.21	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/5/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____: (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 204868
		TAX MAP NUMBER 76.61-2-45

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

RDH Inc.
57 Maxwell St
Albany, NY 12208-1638

PROPERTY INFORMATION:

ACCOUNT #: 05209
DIMENSION: 20 X 49
ROLL: 1
LOCATION: 376 Delaware Ave
SCHOOL: 010100
FULL MARKET VALUE: 44,021
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 42,700
TAXABLE VALUE: 42,700

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	42,700	3.614679	154.35
City Tax	58,850,000	0.5%	42,700	14.222500	607.30
Delinquent Water			0		236.56

TOTAL BASE TAXES DUE: \$998.21

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$998.21	\$0.00	\$998.21

TOTAL TAX DUE: \$998.21*

*Total Amount Due: \$998.21; OR 1st Installment of \$499.11 due by 1/31/2020, and 2nd Installment of \$499.11 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

496

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 395 Clinton Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-64-4-61	
Account number (as appears on tax bill)		Amount of taxes currently billed \$268.21	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 203378
		TAX MAP NUMBER 65.64-4-61

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

SCOTT JUSTIN
752 S PEARL St
Albany, NY 12202

PROPERTY INFORMATION:

ACCOUNT #: 10678
DIMENSION: 23.69 X 125
ROLL: 1
LOCATION: 395 Clinton Ave
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Illegal Trash			0		118.71
Delinquent Water			0		127.87
TOTAL BASE TAXES DUE:					\$268.21

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$268.21	\$0.00	\$268.21

TOTAL TAX DUE: \$268.21*

*Total Amount Due: \$268.21; OR 1st Installment of \$134.11 due by 1/31/2020, and 2nd Installment of \$134.11 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation					
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			Location of property (street address) 417 First St		
City, village, or post office Albany		State NY	ZIP code 12207		City, town, or village Albany
			State NY	ZIP code 12206	
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 105.55-6-600	
Account number (as appears on tax bill)				Amount of taxes currently billed \$149.50	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment/review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 206632	TAX MAP NUMBER 65,55-6-66

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 14852
DIMENSION: 23 X 118.25
ROLL: 1
LOCATION: 417 First St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

PROPERTY OWNER:

MASTERS CARMEN
393 CLINTON Ave
Albany, NY 12206

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		127.87

TOTAL BASE TAXES DUE: \$149.50

Date Paid	Amount Paid

\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$149.50	\$0.00	\$149.50

TOTAL TAX DUE: \$149.50*

*Total Amount Due: \$149.50; OR 1st Installment of \$74.75 due by 1/31/2020, and 2nd Installment of \$74.75 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

500

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 465 E. 11th St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		State NY	ZIP code 12206
Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-46-3-28	
Account number (as appears on tax bill)		Amount of taxes currently billed \$216.21	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 205801
		TAX MAP NUMBER 65.46-3-28

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
HAMPTON BEN
Victor Rosenthal
115 Krumkill Rd Apt 312
Albany, NY 12208

PROPERTY INFORMATION:

ACCOUNT #: 14328
DIMENSION: 35.1 X 65
ROLL: 1
LOCATION: 465 Elk St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		194.58
TOTAL BASE TAXES DUE:					\$216.21

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$216.21	\$0.00	\$216.21

TOTAL TAX DUE: \$216.21*

*Total Amount Due: \$216.21; OR 1st Installment of \$108.11 due by 1/31/2020, and 2nd Installment of \$108.11 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

502

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 513 Third St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 69.38-1-36	
		Amount of taxes currently billed 892.23	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 3/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 223024
		TAX MAP NUMBER 65.38-1-36

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

Sawyer Marjorie
513 Third St
Albany, NY 12206

PROPERTY INFORMATION:

ACCOUNT #: 13677
DIMENSION: 25 X 133
ROLL: 1
LOCATION: 513 Third St
SCHOOL: 010100
FULL MARKET VALUE: 49,485
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 48,000
TAXABLE VALUE: 48,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	48,000	3.614679	173.50
City Tax	58,850,000	0.5%	48,000	10.808400	518.80
Delinquent Water			0		199.93
TOTAL BASE TAXES DUE:					\$892.23

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$892.23	\$0.00	\$892.23

TOTAL TAX DUE: \$892.23*

*Total Amount Due: \$892.23; OR 1st Installment of \$446.12 due by 1/31/2020, and 2nd Installment of \$446.12 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

504

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 525 Second St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-39-1-78	
		Amount of taxes currently billed \$1096.94	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment/review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 220723	TAX MAP NUMBER 65.39-1-78

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 13494
DIMENSION: 22.3 X 127.33
ROLL: 1
LOCATION: 525 Second St
SCHOOL: 010100
FULL MARKET VALUE: 2,268
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 2,200
TAXABLE VALUE: 2,200

PROPERTY OWNER:

MKA PROPERTIES, LLC
551 MAIN Ave
WYNANTSKILL, NY 12198

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	2,200	3.614679	7.95
City Tax	58,850,000	0.5%	2,200	10.808400	23.78
Illegal Trash			0		941.91
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$1,095.94

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,095.94	\$0.00	\$1,095.94

TOTAL TAX DUE: \$1,095.94*

*Total Amount Due: \$1,095.94; OR 1st Installment of \$547.97 due by 1/31/2020, and 2nd Installment of \$547.97 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

506

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation					
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			Location of property (street address) 927 Second St		
City, village, or post office Albany		State NY	ZIP code 12207	City, town, or village Albany	
		State NY	ZIP code 12206		
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-39-1-77	
Account number (as appears on tax bill)				Amount of taxes currently billed \$1679.71	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 220725	TAX MAP NUMBER 65.39-1-77

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
MKA PROPERTIES, LLC
551 MAIN Ave
WYNANTSKILL, NY 12198

PROPERTY INFORMATION:

ACCOUNT #: 13495
DIMENSION: 24.96 X 127.33
ROLL: 1
LOCATION: 527 Second St
SCHOOL: 010100
FULL MARKET VALUE: 1,443
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,400
TAXABLE VALUE: 1,400

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,400	3.614679	5.06
City Tax	58,850,000	0.5%	1,400	10.808400	15.13
Illegal Trash			0		520.53
Delinquent Water			0		138.99

TOTAL BASE TAXES DUE: \$679.71

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$679.71	\$0.00	\$679.71

TOTAL TAX DUE: \$679.71*

*Total Amount Due: \$679.71; OR 1st Installment of \$339.86 due by 1/31/2020, and 2nd Installment of \$339.86 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

508

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 939 Clinton Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309		State NY
Account number (as appears on tax bill)		ZIP code 12206	
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.55 - 5-55		Amount of taxes currently billed \$316.44	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/5/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 203456
		TAX MAP NUMBER 65.55-5-55

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 14716
DIMENSION: 18.74 X 125
ROLL: 1
LOCATION: 539 Clinton Ave
SCHOOL: 010100
FULL MARKET VALUE: 15,464
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 15,000
TAXABLE VALUE: 15,000

PROPERTY OWNER:

MCDONALD CHRIS
1028 LOUDON Rd
COHOES, NY 12047

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
Delinquent Water			0		100.09
TOTAL BASE TAXES DUE:					\$316.44

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$316.44	\$0.00	\$316.44

TOTAL TAX DUE: \$316.44*

*Total Amount Due: \$316.44; OR 1st Installment of \$158.22 due by 1/31/2020, and 2nd Installment of \$158.22 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

510

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 392 Third St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 66.30-2-19	
		Amount of taxes currently billed \$149.60	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/16/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 223091
		TAX MAP NUMBER 65.30-2-19

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 13618
DIMENSION: 23 X 127.27
ROLL: 1
LOCATION: 592 Third St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

PROPERTY OWNER:

RODRIQUEZ RAFAEL
528 SECOND St
Albany, NY 12208

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		127.87
TOTAL BASE TAXES DUE:					\$149.50

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$149.50	\$0.00	\$149.50

TOTAL TAX DUE: \$149.50*

*Total Amount Due: \$149.50; OR 1st Installment of \$74.75 due by 1/31/2020, and 2nd Installment of \$74.75 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

512

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 617 Third St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 64.30-1-62	
		Amount of taxes currently billed \$88.18	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/10/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 223113	TAX MAP NUMBER 65.30-1-62	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 13727 DIMENSION: 20.53 X 93 ROLL: 1 LOCATION: 617 Third St SCHOOL: 010100 FULL MARKET VALUE: 5,155 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 5,000 TAXABLE VALUE: 5,000	
PROPERTY OWNER: IPEK HADI 103 CHANCELLOR Dr GUILDERLAND, NY 12804					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	5,000	3.614679	18.07
City Tax	58,850,000	0.5%	5,000	14.222500	71.11
TOTAL BASE TAXES DUE:					\$89.18

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$89.18	\$0.00	\$89.18

TOTAL TAX DUE: \$89.18*

*Total Amount Due: \$89.18; OR 1st Installment of \$44.59 due by 1/31/2020, and 2nd Installment of \$44.59 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

514

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 623 Washington Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.45-3-27	
		Amount of taxes currently billed \$2433.43	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant: [Signature] Date: 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/6/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ ; (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 224456
		TAX MAP NUMBER 65.45-3-27

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

Padula Eleonora
Padula Frank A
623 Washington Ave
Albany, NY 12206

PROPERTY INFORMATION:

ACCOUNT #: 13009
DIMENSION: 33.03 X 87
ROLL: 1
LOCATION: 623 Washington Ave
SCHOOL: 010100
FULL MARKET VALUE: 156,701
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 152,000
TAXABLE VALUE: 152,000

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	152,000	3.614679	549.43
City Tax	58,850,000	0.5%	152,000	10.808400	1,642.88
Delinquent Water			0		241.12

TOTAL BASE TAXES DUE: \$2,433.43

Date Paid	Amount Paid
-----------	-------------

\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$2,433.43	\$0.00	\$2,433.43

TOTAL TAX DUE: \$2,433.43*

*Total Amount Due: \$2,433.43; OR 1st Installment of \$1,216.72 due by 1/31/2020, and 2nd Installment of \$1,216.72 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

516

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 663 Second St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		State NY	
Evening contact number 518-407-0309		ZIP code 12206	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 64.30-2-41.2	
		Amount of taxes currently billed \$360.09	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 4/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 220783	TAX MAP NUMBER 65.30-2-41.2	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 33452 DIMENSION: 49.6 X 127.75 ROLL: 1 LOCATION: 663 Second St SCHOOL: 010100 FULL MARKET VALUE: 5,155 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 5,000 TAXABLE VALUE: 5,000	
PROPERTY OWNER: MOHAMED QAIS F 1140 FOX CREEK Rd PRESTON HOLLOW, NY 12469					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	5,000	3.614679	18.07
City Tax	58,850,000	0.5%	5,000	10.808400	54.04
Delinquent Water			0		277.98
TOTAL BASE TAXES DUE:					\$350.09

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$350.09	\$0.00	\$350.09

TOTAL TAX DUE: \$350.09*

*Total Amount Due: \$350.09; OR 1st Installment of \$175.05 due by 1/31/2020, and 2nd Installment of \$175.05 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

518

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 699 Third St	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property Identification (see tax bill or assessment roll) 64.21-1-72	
Account number (as appears on tax bill)		Amount of taxes currently billed 601.70	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/16/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 223139	TAX MAP NUMBER 65.21-1-72

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 13753
DIMENSION: 25 X 125
ROLL: 1
LOCATION: 699 Third St
SCHOOL: 010100
FULL MARKET VALUE: 25,773
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 25,000
TAXABLE VALUE: 25,000

PROPERTY OWNER:

Grimaldi Samuel
699 Third St
Albany, NY 12206

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	25,000	3.614679	90.37
City Tax	58,850,000	0.5%	25,000	10.808400	270.21
Delinquent Water			0		241.12
TOTAL BASE TAXES DUE:					\$601.70

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$601.70	\$0.00	\$601.70

TOTAL TAX DUE: \$601.70*

*Total Amount Due: \$601.70; OR 1st Installment of \$300.85 due by 1/31/2020, and 2nd Installment of \$300.85 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

520

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			Location of property (street address) 811 Livingston Ave		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			City, town, or village Albany		
City, village, or post office Albany			State NY		
State NY			ZIP code 12207		
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.21-1-34	
Account number (as appears on tax bill)				Amount of taxes currently billed \$232.89	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/10/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____ _____
--

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848									
		BANK	BILL 211936	TAX MAP NUMBER 65.21-1-34									
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 13873 DIMENSION: 21.54 X 110 ROLL: 1 LOCATION: 811 Livingston Ave SCHOOL: 010100 FULL MARKET VALUE: 6,392 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 6,200 TAXABLE VALUE: 6,200									
PROPERTY OWNER: COLEMAN SAMUEL C/O WEND NEIGHBORHOOD ASS. 187 S ALLEN St Albany, NY 12208		<table border="1"> <thead> <tr> <th>EXEMPTION</th> <th>VALUE</th> <th>FULL VALUE</th> <th>TAX PURPOSE</th> </tr> </thead> <tbody> <tr> <td colspan="4"> </td> </tr> </tbody> </table>				EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE				
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE										

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	6,200	3.614679	22.41
City Tax	58,850,000	0.5%	6,200	14.222500	88.18
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$232.89

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$232.89	\$0.00	\$232.89

TOTAL TAX DUE: \$232.89*

*Total Amount Due: \$232.89; OR 1st Installment of \$116.45 due by 1/31/2020, and 2nd Installment of \$116.45 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

522

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 1707 Broadway	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 66-37-1-31	
Account number (as appears on tax bill)		Amount of taxes currently billed \$1639.09	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 201878
		TAX MAP NUMBER 66.37-1-31

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:

City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 11352
DIMENSION: 25 X 83.58
ROLL: 1
LOCATION: 1207 Broadway
SCHOOL: 010100
FULL MARKET VALUE: 86,598
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 84,000
TAXABLE VALUE: 84,000

PROPERTY OWNER:

Prime Property Protection Llc
525 Union St Ste 102
Schenectady, NY 12305

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	84,000	3.614679	303.63
City Tax	58,850,000	0.5%	84,000	10.808400	907.91
Delinquent Water			0		423.51
TOTAL BASE TAXES DUE:					\$1,635.05

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$1,635.05	\$0.00	\$1,635.05

TOTAL TAX DUE: \$1,635.05*

*Total Amount Due: \$1,635.05; OR 1st Installment of \$817.53 due by 1/31/2020, and 2nd Installment of \$817.53 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

524

Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 1709 Broadway	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		State NY	
Evening contact number 518-407-0309		ZIP code 12204	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 66-37-1-30	
		Amount of taxes currently billed \$321.96	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 201880	TAX MAP NUMBER 66.37-1-30	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
PROPERTY OWNER: Prime Property Protection Llc 525 Union St Ste 102 Schenectady, NY 12305		ACCOUNT #:		11353	
		DIMENSION:		19 X 83	
		ROLL:		1	
		LOCATION:		1209 Broadway	
		SCHOOL:		010100	
		FULL MARKET VALUE:		15,464	
		UNIFORM % OF VALUE:		97.00%	
		TOTAL ASSESSMENT:		15,000	
		TAXABLE VALUE:		15,000	
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	15,000	3.614679	54.22
City Tax	58,850,000	0.5%	15,000	10.808400	162.13
Delinquent Water			0		105.61
TOTAL BASE TAXES DUE:					\$321.96

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$321.96	\$0.00	\$321.96

TOTAL TAX DUE: \$321.96*

*Total Amount Due: \$321.96; OR 1st Installment of \$160.98 due by 1/31/2020, and 2nd Installment of \$160.98 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 10 Alexander St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.65-3-30
Account number (as appears on tax bill)		Amount of taxes currently billed \$132.81
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/10/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 200157	TAX MAP NUMBER 76.65-3-30	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 02911 DIMENSION: 20.69 X 34.1 ROLL: 1 LOCATION: 6 Alexander St SCHOOL: 010100 FULL MARKET VALUE: 1,546 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 1,500 TAXABLE VALUE: 1,500	
PROPERTY OWNER: MORLOCK FREDERICK 3 102ND St TROY, NY 12180					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		111.18
TOTAL BASE TAXES DUE:					\$132.81

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$132.81	\$0.00	\$132.81

TOTAL TAX DUE: \$132.81*

*Total Amount Due: \$132.81; OR 1st Installment of \$66.41 due by 1/31/2020, and 2nd Installment of \$66.41 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554 528
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 2 Sparkill Ave
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	City, town, or village Albany NY
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 75.76-1-30		State 12209
Account number (as appears on tax bill)		Amount of taxes currently billed \$237.07
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>MADDA</u>	Date <u>3/6/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of _____ who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____ _____
--

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 221472	TAX MAP NUMBER 75.76-1-30	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 00838 DIMENSION: 25 X 114.33 ROLL: 1 LOCATION: 2 Sparkill Ave SCHOOL: 010100 FULL MARKET VALUE: 7,010 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 6,800 TAXABLE VALUE: 6,800	
PROPERTY OWNER: FRANY GEORGE J JR 35 HUNTLEIGH Dr LOUDONVILLE, NY 12211					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	6,800	3.614679	24.58
City Tax	58,850,000	0.5%	6,800	10.808400	73.50
Delinquent Water			0		138.99
TOTAL BASE TAXES DUE:					\$237.07

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$237.07	\$0.00	\$237.07

TOTAL TAX DUE: \$237.07*

*Total Amount Due: \$237.07; OR 1st Installment of \$118.54 due by 1/31/2020, and 2nd Installment of \$118.54 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 31 Normanside Dr
City, village, or post office Albany	State NY	ZIP code 12207
City, town, or village Albany	State NY	ZIP code 12208
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 74.11-2-64
Account number (as appears on tax bill)		Amount of taxes currently billed \$368.59
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 215776	TAX MAP NUMBER 74.11-2-64	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION:	
				ACCOUNT #:	23132
				DIMENSION:	65 X 125
				ROLL:	1
				LOCATION:	31 Normanside Dr
				SCHOOL:	010100
				FULL MARKET VALUE:	515
				UNIFORM % OF VALUE:	97.00%
				TOTAL ASSESSMENT:	500
				TAXABLE VALUE:	500
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY OWNER:

De Mase James V
845 Western Ave
Albany, NY 12203

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	500	3.614679	1.81
City Tax	58,850,000	0.5%	500	10.808400	5.40
Delinquent Water			0		361.38
TOTAL BASE TAXES DUE:					\$368.59

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$368.59	\$0.00	\$368.59

TOTAL TAX DUE: \$368.59*

*Total Amount Due: \$368.59; OR 1st Installment of \$184.30 due by 1/31/2020, and 2nd Installment of \$184.30 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 30 Emmet St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	City, town, or village Albany
		State NY
		ZIP code 12204
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 69.52-1-58		
Account number (as appears on tax bill)		Amount of taxes currently billed \$143.93
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant

[Handwritten Signature]

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <i>[Handwritten Signature]</i>	Date <u>3/16/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of _____ who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 206003	TAX MAP NUMBER 65.52-1-58	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY	TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035	PROPERTY INFORMATION:			
		ACCOUNT #:	12078		
		DIMENSION:	22 X 75		
		ROLL:	1		
		LOCATION:	30 Emmet St		
		SCHOOL:	010100		
PROPERTY OWNER: ARMBRESTER ROBERT T BROOKS ANITA WILHEL 30 Emmet St Albany, NY 12204		FULL MARKET VALUE:	1,546		
		UNIFORM % OF VALUE:	97.00%		
		TOTAL ASSESSMENT:	1,500		
		TAXABLE VALUE:	1,500		
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$143.93

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$143.93	\$0.00	\$143.93

TOTAL TAX DUE: \$143.93*

*Total Amount Due: \$143.93; OR 1st Installment of \$71.97 due by 1/31/2020, and 2nd Installment of \$71.97 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 79 Normanside Dr	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number 518-407-0309	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 74.11 - 2 - 65	
		Amount of taxes currently billed \$368.59	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 215775
		TAX MAP NUMBER 74.11-2-65	

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY INFORMATION:

ACCOUNT #: 23131
DIMENSION: 65 X 125
ROLL: 1
LOCATION: 29 Normanside Dr
SCHOOL: 010100
FULL MARKET VALUE: 515
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 500
TAXABLE VALUE: 500

PROPERTY OWNER:

De Mase David N
845 Western Ave
Albany, NY 12203

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	500	3.614679	1.81
City Tax	58,850,000	0.5%	500	10.808400	5.40
Delinquent Water			0		361.38
TOTAL BASE TAXES DUE:					\$368.59

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$368.59	\$0.00	\$368.59

TOTAL TAX DUE: \$368.59*

*Total Amount Due: \$368.59; OR 1st Installment of \$184.30 due by 1/31/2020, and 2nd Installment of \$184.30 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			Location of property (street address) 27 Normanside Dr		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor			City, town, or village Albany		
City, village, or post office Albany			State NY		ZIP code 12207
Daytime contact number 518-407-0309		Evening contact number 518-407-0309		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 74-11-2-66	
Account number (as appears on tax bill)				Amount of taxes currently billed \$368.59	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date					

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/10/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 215773	TAX MAP NUMBER 74.11-2-66	

MAKE CHECKS PAYABLE TO: CITY OF ALBANY	TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035	PROPERTY INFORMATION: ACCOUNT #: 23130 DIMENSION: 65 X 125 ROLL: 1 LOCATION: 27 Normanside Dr SCHOOL: 010100 FULL MARKET VALUE: 515 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 500 TAXABLE VALUE: 500
--	---	---

PROPERTY OWNER: De Mase James V 845 Western Ave Albany, NY 12203	<table border="1"> <thead> <tr> <th>EXEMPTION</th> <th>VALUE</th> <th>FULL VALUE</th> <th>TAX PURPOSE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE				
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE						

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	500	3.614679	1.81
City Tax	58,850,000	0.5%	500	10.808400	5.40
Delinquent Water			0		361.38
TOTAL BASE TAXES DUE:					\$368.59

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$368.59	\$0.00	\$368.59

TOTAL TAX DUE: \$368.59*

*Total Amount Due: \$368.59; OR 1st Installment of \$184.30 due by 1/31/2020, and 2nd Installment of \$184.30 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

538

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 26 Pennsylvania Ave	
City, village, or post office Albany	State NY	ZIP code 12207	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65-57-1-67	
Account number (as appears on tax bill)		Amount of taxes currently billed \$255.87	
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date			

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official M. Allen	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ :
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 217313	TAX MAP NUMBER 65.57-1-67	
<u>MAKE CHECKS PAYABLE TO:</u> CITY OF ALBANY		<u>TO PAY IN PERSON:</u> City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		<u>PROPERTY INFORMATION:</u> ACCOUNT #: 10403 DIMENSION: 37.5 X 100 ROLL: 1 LOCATION: 26 Pennsylvania Ave SCHOOL: 010100 FULL MARKET VALUE: 2,577 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 2,500 TAXABLE VALUE: 2,500	
<u>PROPERTY OWNER:</u> Hobbs Martha 44 Lawn Ave Albany, NY 12204					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	2,500	3.614679	9.04
City Tax	58,850,000	0.5%	2,500	14.222500	35.56
Delinquent Water			0		211.27
TOTAL BASE TAXES DUE:					\$255.87

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$255.87	\$0.00	\$255.87

TOTAL TAX DUE: \$255.87*

*Total Amount Due: \$255.87; OR 1st Installment of \$127.94 due by 1/31/2020, and 2nd Installment of \$127.94 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19)

540

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 23 Normanside Dr
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	City, town, or village Albany NY
Account number (as appears on tax bill)		State 12208
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 74.11-2-68		Amount of taxes currently billed \$368.59
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/16/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
	BANK	BILL 215770	TAX MAP NUMBER 74.11-2-68

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:

De Mase James V
845 Western Ave
Albany, NY 12203

PROPERTY INFORMATION:

ACCOUNT #: 23128
DIMENSION: 65 X 117.5
ROLL: 1
LOCATION: 23 Normanside Dr
SCHOOL: 010100
FULL MARKET VALUE: 515
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 500
TAXABLE VALUE: 500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	500	3.614679	1.81
City Tax	58,850,000	0.5%	500	10.808400	5.40
Delinquent Water			0		361.38
TOTAL BASE TAXES DUE:					\$368.59

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$368.59	\$0.00	\$368.59

TOTAL TAX DUE: \$368.59*

*Total Amount Due: \$368.59; OR 1st Installment of \$184.30 due by 1/31/2020, and 2nd Installment of \$184.30 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554
(12/19) **542**

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 23 Leonard St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76-72-4-60
Account number (as appears on tax bill)		Amount of taxes currently billed \$196.06
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant

Date

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <i>[Signature]</i>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	TAX MAP NUMBER
		BILL 211372	76.72-4-60

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
BARTEE RONNIE S
17 Leonard St
Albany, NY 12202

PROPERTY INFORMATION:

ACCOUNT #:	02628		
DIMENSION:	28 X 59		
ROLL:	1		
LOCATION:	23 Leonard St		
SCHOOL:	010100		
FULL MARKET VALUE:		2,887	
UNIFORM % OF VALUE:		97.00%	
TOTAL ASSESSMENT:		2,800	
TAXABLE VALUE:		2,800	
EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	2,800	3.614679	10.12
City Tax	58,850,000	0.5%	2,800	10.808400	30.26
Delinquent Water			0		155.68
TOTAL BASE TAXES DUE:					\$196.06

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$196.06	\$0.00	\$196.06

TOTAL TAX DUE: \$196.06*

*Total Amount Due: \$196.06; OR 1st Installment of \$98.03 due by 1/31/2020, and 2nd Installment of \$98.03 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 13 S. Swan St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	City, town, or village Albany
		State NY
		ZIP code 12210
Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.81-6-81		
Account number (as appears on tax bill)		Amount of taxes currently billed \$1161.19
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant

Date

1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐

Error in essential fact ☐

Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution

Date



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 220001	TAX MAP NUMBER 65.81-6-81	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 07689 DIMENSION: 27.7 X 25 ROLL: 1 LOCATION: 13 S Swan St SCHOOL: 010100 FULL MARKET VALUE: 515 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 500 TAXABLE VALUE: 500	
PROPERTY OWNER: Johnson William PO Box 973 Albany, NY 12201					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	500	3.614679	1.81
City Tax	58,850,000	0.5%	500	10.808400	5.40
Delinquent Water			0		153.98
TOTAL BASE TAXES DUE:					\$161.19

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$161.19	\$0.00	\$161.19

TOTAL TAX DUE: \$161.19*

*Total Amount Due: \$161.19; OR 1st Installment of \$80.60 due by 1/31/2020, and 2nd Installment of \$80.60 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 7 Third Ave
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76.73-1-43
Account number (as appears on tax bill)		Amount of taxes currently billed \$116.53
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(Insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 222728	TAX MAP NUMBER 76.73-1-43	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 02131 DIMENSION: 30 X 44.64 ROLL: 1 LOCATION: 7 Third Ave SCHOOL: 010100 FULL MARKET VALUE: 14,433 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 14,000 TAXABLE VALUE: 14,000	
PROPERTY OWNER: ERICKSON STEPHEN J PO Box 10003 Albany, NY 12202					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	14,000	3.614679	50.61
City Tax	58,850,000	0.5%	14,000	14.222500	199.12
Delinquent Water			0		166.80
TOTAL BASE TAXES DUE:					\$416.53

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$416.53	\$0.00	\$416.53

TOTAL TAX DUE: \$416.53*

*Total Amount Due: \$416.53; OR 1st Installment of \$208.27 due by 1/31/2020, and 2nd Installment of \$208.27 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554

(12/19)

548

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 31 Osborne St
City, village, or post office Albany	State NY	ZIP code 12207
City, town, or village Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 76-56-2-85
Account number (as appears on tax bill)		Amount of taxes currently billed \$136.72
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by ALBANY for the year(s) 2020.
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 2/25/2020	Period of warrant for collection of taxes 1/1/2020
Last day for collection of taxes without interest 1/31/2020	Recommendation Approve application ☐ Deny application ☐
Signature of official [Signature]	Date 3/6/2020

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ : (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020		WARRANT: 12/31/2019		ESTIMATED COUNTY STATE AID: \$91,269,848	
		BANK	BILL 216831	TAX MAP NUMBER 76.56-2-85	
MAKE CHECKS PAYABLE TO: CITY OF ALBANY		TO PAY IN PERSON: City Hall Room 110 24 Eagle Street Albany, NY 12207 (518) 434-5035		PROPERTY INFORMATION: ACCOUNT #: 03099 DIMENSION: 22 X 68.52 ROLL: 1 LOCATION: 31 Osborne St SCHOOL: 010100 FULL MARKET VALUE: 1,031 UNIFORM % OF VALUE: 97.00% TOTAL ASSESSMENT: 1,000 TAXABLE VALUE: 1,000	
PROPERTY OWNER: Rockowitz Morris Johnnie E. Dow Jr. PO Box 294 Schoharie, NY 12157					
		EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,000	3.614679	3.61
City Tax	58,850,000	0.5%	1,000	10.808400	10.81
Delinquent Water			0		122.30
TOTAL BASE TAXES DUE:					\$136.72

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$136.72	\$0.00	\$136.72

TOTAL TAX DUE: \$136.72*

*Total Amount Due: \$136.72; OR 1st Installment of \$68.36 due by 1/31/2020, and 2nd Installment of \$68.36 plus interest due no later than 12/31/2020.



Application for Corrected Tax Roll

RP-554 550
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation		
Mailing address of owners (number and street or PO box) 69 State Street 8th Floor		Location of property (street address) 1 Batcher St
City, village, or post office Albany	State NY	ZIP code 12207
Daytime contact number 518-407-0309	Evening contact number 518-407-0309	Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 70.72-3-33
Account number (as appears on tax bill)		Amount of taxes currently billed \$438.00
Reasons for requesting a correction to tax roll: As of 12/28/2018, properties acquired by the Land Bank are exempt upon the date of transfer of title, notwithstanding the applicable taxable status date		

I hereby request a correction of tax levied by Albany for the year(s) 2020
(County, city, village, etc.)

Signature of applicant [Signature] Date 1/24/20

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received <u>2/25/2020</u>	Period of warrant for collection of taxes <u>1/1/2020</u>
Last day for collection of taxes without interest <u>1/31/2020</u>	Recommendation Approve application ☐ Deny application ☐
Signature of official <u>[Signature]</u>	Date <u>3/6/2020</u>

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____:
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☐

Amount of taxes currently billed	Corrected tax
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution _____ Date _____



CITY OF ALBANY - 2020 PROPERTY TAXES

FISCAL YEAR: 1/1/2020 to 12/31/2020	WARRANT: 12/31/2019	ESTIMATED COUNTY STATE AID: \$91,269,848
	BANK	BILL 200652
		TAX MAP NUMBER 76.72-3-33

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-5035

PROPERTY OWNER:
CEP ENTERPRISES LLC
6951 NY ROUTE 66
EAST NASSAU, NY 12062

PROPERTY INFORMATION:

ACCOUNT #: 02612
DIMENSION: 75 X 60
ROLL: 1
LOCATION: 1 Batcher St
SCHOOL: 010100
FULL MARKET VALUE: 1,546
UNIFORM % OF VALUE: 97.00%
TOTAL ASSESSMENT: 1,500
TAXABLE VALUE: 1,500

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
-----------	-------	------------	-------------

PROPERTY TAX PAYERS BILL OF RIGHT

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
County Tax	17,676,006	1.5%	1,500	3.614679	5.42
City Tax	58,850,000	0.5%	1,500	10.808400	16.21
Delinquent Water			0		416.97
TOTAL BASE TAXES DUE:					\$438.60

Date Paid	Amount Paid
	\$0.00

	Tax Amount	Interest	Total Due
Pay By 1/31/2020	\$438.60	\$0.00	\$438.60

TOTAL TAX DUE: \$438.60*

*Total Amount Due: \$438.60; OR 1st Installment of \$219.30 due by 1/31/2020, and 2nd Installment of \$219.30 plus interest due no later than 12/31/2020.



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
OFFICE OF THE EXECUTIVE
112 STATE STREET, ROOM 1200
ALBANY, NEW YORK 12207-2021
(518) 447-7040 - FAX (518) 447-5589
WWW.ALBANYCOUNTY.COM

DANIEL C. LYNCH, ESQ.
DEPUTY COUNTY EXECUTIVE

June 30, 2020

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Room 710
Albany, New York 12207

Dear Chairman Joyce:

The Office of the County Executive requests approval to apply for the Federal Emergency Management Agency's (FEMA) Public Assistance grant program. The New York State Division of Homeland Security and Emergency Services (DHSES) will act as a pass-through for the grant and disburse funding to Albany County. While the period for submitting the Request for Public Assistance is currently open, the County Executive's Office was advised to submit the application as soon as possible (which it did on April 10, 2020).

On March 20, 2020, the COVID-19 pandemic was declared a major disaster in NYS. This authorized FEMA to provide Public Assistance program funding under the Stafford Act to local governments for emergency protective measures. In general, these reimbursement eligible emergency protective measures may include: management, control and reduction of immediate threats to public health and safety; emergency medical care; medical sheltering; purchase and distribution of food; and force account overtime costs.

FEMA's Public Assistance program is a payer of last resort, so assistance cannot be duplicated by other federal funding streams. Additionally, Public Assistance funding is authorized at 75% federal cost share; NYS will determine how the non-federal share (up to 25%) is split with Albany County. Determinations about what can be claimed without duplicating funding, as well as how much is ultimately awarded are ongoing.

Since the claim process involves coordinating Public Assistance and other sources of federal funding across County departments, the County Executive's Office and the Division of Management and Budget will aggregate and submit reimbursement claims on behalf of all County departments, including: Department of Health; Shaker Place Rehabilitation and Nursing Center; Department of Mental Health; Probation Department; Department of Social Services; Department for the Aging; Department of General Services; Department of Public Works; Division of Information Services; and others as appropriate.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Daniel P. McCoy
Albany County Executive

cc: Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



Legislation Text

File #: TMP-1733, **Version:** 2

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Request to apply for FEMA Public Assistance for COVID-19 (DR-4480).

Date: 06/30/2020
Submitted By: Patrick Alderson
Department: County Executive
Title: Policy Analyst
Phone: 518-447-3033
Department Rep.
Attending Meeting: Michael McLaughlin or Patrick Alderson

Purpose of Request:

- ☐ Adopting of Local Law
- ☐ Amendment of Prior Legislation
- ☐ Approval/Adoption of Plan/Procedure
- ☐ Bond Approval
- ☐ Budget Amendment
- ☒ Contract Authorization
- ☐ Countywide Services
- ☐ Environmental Impact/SEQR
- ☐ Home Rule Request
- ☐ Property Conveyance
- ☐ Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- ☐ Contractual
- ☐ Equipment
- ☐ Fringe
- ☐ Personnel
- ☐ Personnel Non-Individual

☐ Revenue

Increase Account/Line No.: Click or tap here to enter text.

Source of Funds: Click or tap here to enter text.

Title Change: Click or tap here to enter text.

CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:

☐ Change Order/Contract Amendment

☐ Purchase (Equipment/Supplies)

☐ Lease (Equipment/Supplies)

☐ Requirements

☐ Professional Services

☐ Education/Training

☒ Grant

Choose an item.

Submission Date Deadline 30 days after DR-4480 closes

☐ Settlement of a Claim

☐ Release of Liability

☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):

Federal Emergency Management Agency

500 C Street S.W.

Washington, D.C. 20472

Additional Parties (Names/addresses):

Recovery/Public Assistance Section

Division of Homeland Security and Emergency Services

1220 Washington Avenue

Building 7A, 4th Floor

Albany, NY 12242

Amount/Raise Schedule/Fee: TBD

Scope of Services: Claim reimbursement for eligible Category B emergency protective measures under FEMA's Public Assistance program.

Bond Res. No.: Click or tap here to enter text.

Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☐ No ☒
If Mandated Cite Authority: Click or tap here to enter text.

Is there a Fiscal Impact: Yes ☒ No ☐
Anticipated in Current Budget: Yes ☐ No ☒

County Budget Accounts:

Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)

Federal: 75%
State: up to 25%
County: up to 25%
Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/20/2020 - 9/20/20
Length of Contract: 8 months

Impact on Pending Litigation

Yes ☐ No ☒
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)

The Office of the County Executive requests approval to apply for the Federal Emergency Management Agency's (FEMA) Public Assistance grant program. On March 20, 2020, the COVID-19 pandemic was declared a major disaster in NYS. This authorized FEMA to provide Public Assistance program funding under the Stafford Act to local governments for emergency protective measures. In general, eligible emergency protective measures may include: management, control and reduction of immediate threats to public health and safety; emergency medical care; medical sheltering; purchase and distribution of food; and force account overtime costs.

Since the claim process involves coordinating Public Assistance and other sources of federal funding across County departments, the County Executive's Office and the Division of Management and Budget will aggregate and submit reimbursement claims on behalf of all County departments, including: Department of Health; Shaker Place Rehabilitation and Nursing Center; Department of Mental Health; Probation Department; Department of Social Services; Department for the Aging; Department of General Services; Department of Public Works; Division of Information Services; and others as appropriate.

Coronavirus (COVID-19) Pandemic: Eligible Emergency Protective Measures

Consistent with the President's national emergency declaration for the coronavirus (COVID-19) pandemic on March 13, 2020, FEMA urges officials to, without delay, take appropriate actions that are necessary to protect public health and safety pursuant to public health guidance and conditions and capabilities in their jurisdictions. FEMA provides the following guidance on the types of emergency protective measures that may be eligible under FEMA's Public Assistance Program in accordance with the COVID-19 Emergency Declaration in order to ensure that resource constraints do not inhibit efforts to respond to this unprecedented disaster.

FEMA Public Assistance Program

In accordance with section 502 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207 (the "Stafford Act"), eligible emergency protective measures taken to respond to the COVID-19 emergency at the direction or guidance of public health officials may be reimbursed under Category B of FEMA's Public Assistance program. *FEMA will not duplicate assistance provided by the [U.S. Department of Health and Human Services](#) (HHS), to include the [Centers for Disease Control and Prevention](#) (CDC), or other federal agencies.*

State, territorial, tribal, and local government entities and certain private non-profit organizations are eligible to apply for [Public Assistance](#). FEMA assistance will be provided at a 75 percent federal cost share. This assistance will require execution of a FEMA-State/Tribal/Territory Agreement, as appropriate, and execution of an applicable emergency plan. Local governments and other eligible PA applicants will apply through their respective state, tribal or territorial jurisdictions.

Eligible Assistance

Under the COVID-19 Emergency Declaration described above, FEMA may provide assistance for emergency protective measures including, but not limited to, the following, if not funded by the HHS/CDC or other federal agency. *While some activities listed may be eligible for funding through HHS/CDC, final reimbursement determinations will be coordinated by HHS and FEMA. FEMA will not duplicate any assistance provided by HHS/CDC:*

- Management, control and reduction of immediate threats to public health and safety:
 - Emergency Operation Center costs



FEMA

- Training specific to the declared event
- Disinfection of eligible public facilities
- Technical assistance to state, tribal, territorial or local governments on emergency management and control of immediate threats to public health and safety
- Emergency medical care:
 - Non-deferrable medical treatment of infected persons in a shelter or temporary medical facility
 - Related medical facility services and supplies
 - Temporary medical facilities and/or enhanced medical/hospital capacity (for treatment when existing facilities are reasonably forecasted to become overloaded in the near term and cannot accommodate the patient load or to quarantine potentially infected persons)
 - Use of specialized medical equipment
 - Medical waste disposal
 - Emergency medical transport
- Medical sheltering (e.g. when existing facilities are reasonably forecasted to become overloaded in the near future and cannot accommodate needs)
 - All sheltering must be conducted in accordance with standards and/or guidance approved by HHS/CDC and must be implemented in a manner that incorporates social distancing measures
 - Non-congregate medical sheltering is subject to prior approval by FEMA and is limited to that which is reasonable and necessary to address the public health needs of the event, is pursuant to the direction of appropriate public health officials and does not extend beyond the duration of the Public Health Emergency
- Household pet sheltering and containment actions related to household pets in accordance with CDC guidelines
- Purchase and distribution of food, water, ice, medicine, and other consumable supplies, to include personal protective equipment and hazardous material suits
- Movement of supplies and persons
- Security and law enforcement
- Communications of general health and safety information to the public
- Search and rescue to locate and recover members of the population requiring assistance
- Reimbursement for state, tribe, territory and/or local government force account overtime costs

More Information

Further information about eligible emergency protective measures can be found in the [Public Assistance Program and Policy Guide](#), FP 104-009-2 (April 2018).

For more information, visit the following federal government websites:

- [Coronavirus \(COVID-19\) \(CDC\)](#)
- [Centers for Medicare & Medicaid Services](#)

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
REQUEST FOR PUBLIC ASSISTANCE

OMB Control Number 1660-0017
Expires December 31, 2019

Paperwork Burden Disclosure Notice			
Public reporting burden for this data collection is estimated to average 15 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, Paperwork Reduction Project (1660-0017) NOTE: Do not send your completed form to this address.			
Privacy Act Statement			
Authority: FEMA is authorized to collect the information requested pursuant to the Robert T. Stafford Disaster Relief and Emergency Assistance Act, §§ 402-403, 406-407, 417, 423, and 427, 42 U.S.C. 5170a-b, 5172-73, 5184, 5189a, 5189e; The American Recovery and Reinvestment Act of 2009, Public Law No. 111-5, § 601; and "Public Assistance Project Administration," 44 C.F.R. §§ 206.202, and 206.209.			
APPLICANT (Political subdivision or eligible applicant) Albany County			DATE SUBMITTED 4/3/2020
COUNTY (Location of Damages. If located in multiple counties, please indicate) Albany			
APPLICANT PHYSICAL LOCATION			
STREET ADDRESS 112 State Street, Room 1200			
CITY Albany	COUNTY Albany	STATE NY	ZIP CODE 12207
MAILING ADDRESS (If different from Physical Location)			
STREET ADDRESS			
POST OFFICE BOX	CITY	STATE	ZIP CODE
Primary Contact/Applicant's Authorized Agent		Alternate Contact	
NAME Daniel McCoy		NAME Patrick Alderson	
TITLE County Executive		TITLE Policy Analyst	
BUSINESS PHONE 518-447-7040		BUSINESS PHONE 518-447-3033	
FAX NUMBER 518-447-5589		FAX NUMBER 518-447-5589	
HOME PHONE (Optional)		HOME PHONE (Optional)	
CELL PHONE		CELL PHONE 646-408-3791	
E-MAIL ADDRESS daniel.mccoy@albanycountyny.gov		E-MAIL ADDRESS patrick.alderson@albanycountyny.gov	
PAGER & PIN NUMBER		PAGER & PIN NUMBER	
Did you participate in the Federal/State Preliminary Damage Assessment (PDA)? ☐ YES ☒ NO			
Private Non-Profit Organization? ☐ YES ☒ NO			
If yes, which of the facilities identified below best describe your organization?			
Title 44 CFR, part 206.221(e) defines an eligible private non-profit facility as: "... any private non-profit educational, utility, emergency, medical or custodial care facility, including a facility for the aged or disabled, and other facility providing essential governmental type services to the general public, and such facilities on Indian reservations." "Other essential governmental service facility means museums, zoos, community centers, libraries, homeless shelters, senior citizen centers, rehabilitation facilities, shelter workshops and facilities which provide health and safety services of a governmental nature. All such facilities must be open to the general public."			
Private Non-Profit Organizations must attach copies of their Tax Exemption Certificate and Organization Charter or By-Laws. If your organization is a school or educational facility, please attach information on accreditation or certification.			
OFFICIAL USE ONLY: FEMA - _____ -DR- _____ - FIPS# _____ DATE RECEIVED _____			

CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988, 2 CFR Part 182, Subpart B. The regulations, published in the May 25, 1990 Federal Register, require certification by sub grantees, prior to award, that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the Division of Homeland Security and Emergency Services determines to award the sub grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants or government wide suspension or debarment. (See 2 CFR Part 180, Subpart G, 180.700, and Subpart H, 180.800)

A. The sub grantee certifies that it ☒ will or ☐ will not continue to provide a drug-free workplace by:

- (a) publishing a statement notifying employees that the unlawful manufacture, distribution, dispersing, possession, or use of a controlled substance is prohibited in the sub grantees workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) establishing an ongoing drug-free awareness program to inform employees about-
 - (1) the dangers of drug abuse in the workplace;
 - (2) the sub grantees policy of maintaining a drug-free workplace;
 - (3) any available drug counseling, rehabilitation, and employee assistance programs;
 - (4) the penalties that may be imposed upon the employee for drug abuse violations occurring in the workplace;
- (c) making it a requirement that each employee to be engaged in the performance of the sub-grant be given a copy of the statement required by paragraph (a);
- (d) notifying the employee in the statement required by paragraph (a) that, as a condition of employment under sub grant, the employee will-
 - (1) abide by the terms of that statement; and
 - (2) notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) notifying the Division of Homeland Security and Emergency Services in writing within ten calendar days after receiving notice under subparagraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Such notice shall include the position title of the employee and the federal identification number of the sub grantee.
- (f) taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d) (2), with respect to any employee who is so convicted-
 - (1) taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (2) requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a),(b), (c), (d), (e), and (f).

B. The sub grantee may insert in the space provided below the site (s) for the performance of work done in connection with this grant:

Organization Name: Albany County Disaster Name: FEMA- 4480 -DR or EM-NY

(Please Print) Name and Title of Authorized Representative: Daniel McCoy, County Executive

Signature: Daniel P. McCoy Date: 04/03/2020

PRESIDENTIAL DECLARATION
FEMA- 4480 -DR or EM-NY

DIVISION OF HOMELAND SECURITY AND EMERGENCY SERVICES
APPLICANT CERTIFICATION

This is to certify the receipt of the guidelines, and associated documents for the Presidential Declaration as administered by the Division of Homeland Security and Emergency Services (DHSES).

The signature below indicates the intent of the (circle one and PRINT in the name):

County City Town Village State Agency School Fire District Non-profit
of Albany, hereinafter referred to as the sub
grantee, to participate in the Presidential Declaration FEMA-4480 -DR or EM-NY

The public assistance program is voluntary. It is understood that by choosing to participate in the grant program, the sub grantee is responsible to: 1) comply with all federal and state laws, regulations, policies, and procedures; 2) fulfill the eligibility requirements to participate as a sub grantee of the State; and 3) certify that all figures to be provided in the application are true and correct for costs associated with the declaration provisions.

If debris removal is authorized, the sub grantee agrees to indemnify and hold harmless the State of New York and the United States of America for any claims arising from the removal of debris or wreckage for this disaster. The sub grantee agrees that debris removal from public and private property will not occur until all state and federal requirements are met.

The undersigned agrees to participate in this program and certifies that to the best of their Knowledge and belief, all work and costs claimed are eligible in accordance with the grant conditions and all work claimed has been or will be completed.

SIGNED:  DATE: 4/3/2020
CHIEF EXECUTIVE OFFICER
NAME: Daniel McCoy PHONE: (518) 447-7040
Please type or print name/address

ADDRESS: 112 State Street, Room 1200
CITY, STATE: Albany, NY ZIP CODE: 12207

Designation of the Point of Contact if different from above:

NAME: Patrick Alderson PHONE: (518) 447-3033
Please type or print name

TITLE & ADDRESS: Policy Analyst - 112 State Street, Room 1200, Albany, NY 12207

FEDERAL TAX IDENTIFICATION NUMBER
(Not for use by State Agencies or Local Political Sub-Divisions)
Disaster No. FEMA-4480 -DR / EM-NY

In order to process your payment for disaster assistance funds, the Division of Homeland Security and Emergency Services will need to provide the State Comptroller's Office with your PAYEE IDENTIFICATION NUMBER.

For an individual, the Payee ID is the social security number. For corporations, including Private non-profits, partnerships and other business entities, the Payee ID is the Federal Tax Identification Number (the number used to report Federal withholding taxes to the government). In either case, it is a nine-digit number as follows:

Individual: 123-45-6789

Business: 12-3456789

Federal Tax ID #: 146002563
Applicant Name: Albany County
Applicant Address: 112 State Street, Room 1200
City, Zip Code: Albany, 12207
Telephone #: 518-447-7040
Signature: Patrick Alderson Digitally signed by Patrick Alderson
Date: 2020.04.03 10:57:43 -04'00' Date: 4/3/20

**Please provide this number, as it will assist us in providing
your funding in a timely manner**

Please mail or fax, as soon as possible, to:

Public Assistance/Recovery Section
Division of Homeland Security and Emergency Services
1220 Washington Avenue
Building 7A, 4th Floor
Albany, New York 12242
Phone: 518-292-2293
Fax: 518-322-4984

DUNS NUMBER
Disaster No. FEMA- 4480 -DR-NY
(REQUIRED FOR ALL APPLICANTS)

In order to process your payment for disaster assistance funds, the Division of Homeland Security and Emergency Services will need to provide the Federal Emergency Management Agency with your DUNS Number. Your application cannot be processed until the appropriate DUNS number is received.

Located in the County of: Albany
DUNS # (9 Digits): 060536653
Applicant Name: Albany County
Applicant Address: 112 State Street, Room 1200
City, Zip Code: Albany 12207
Telephone #: 518-447-7040
Signature: Patrick Alderson Digitally signed by Patrick Alderson
Date: 2020.04.03 10:47:59 -04'00' Date: 04/03/20

**Please provide this number, as it will assist us in providing
your funding in a timely manner**

Please mail or fax, as soon as possible, to:

Public Assistance/Recovery Section
Division of Homeland Security and Emergency Services
1220 Washington Avenue
Building 7A, 4th Floor
Albany, New York 12242
Phone: 518-292-2293
Fax: 518-322-4984