



**CITY OF EASTON, COUNTY OF NORTHAMPTON  
LOCAL ECONOMIC REVITALIZATION TAX ASSISTANCE (LERTA)  
PROGRAM APPLICATION FOR PROPERTY TAX ABATEMENT**



**Property Information:**

_____	_____	_____	_____	_____
Tax ID	Property Street Address	City	State	Zip
_____	_____	_____	_____	_____
Owner Name	Owner Mailing Address	City	State	Zip
( _____ ) _____ - _____	( _____ ) _____ - _____	_____		
Owner Telephone	Owner Fax	Owner Email		

**Primary Contact (if other than property owner):**

_____	_____	_____	_____	_____
Primary Contact Name	Primary Contact Address	City	State	Zip
( _____ ) _____ - _____	( _____ ) _____ - _____	_____		
Primary Contact Telephone	Primary Contact Fax	Primary Contact Email		

**Brief Description of Property and Improvements:**

\_\_\_\_\_

\_\_\_\_\_

**Property Use:**      Commercial      Industrial      Other: \_\_\_\_\_

                         Residential      Mixed-Use      (Define)      Total Cost of Improvements \_\_\_\_\_

**Applicant Verification**

I affirm that all information provided in this form is accurate, that it is my duty to notify the municipal inspector and the County Assessment Director upon completion these improvements, and that all municipal utility accounts and applicable municipal, school district, county taxes associated with this property are current. I understand that inaccuracies/delinquencies are grounds for ineligibility.

_____	_____
Property Owner Signature	Date

**DO NOT WRITE BELOW THIS LINE – CITY/COUNTY USE ONLY**

**Permit Information**

**Program Information**

_____	_____	_____	_____ %
C/O Permit #	Permit Issue Date	Duration (Years)	Exemption per Year

**Tax and Utility Billing Account Status**

City:      Current      Delinquent: _____	Water:      Current      Delinquent: _____
County:      Current      Delinquent: _____	Sewer:      Current      Delinquent: _____
School:      Current      Delinquent: _____	Total Tax/Utility Balance Due: _____

**Municipal Verification**

I certify, to the best of my knowledge, that the above-referenced property is located in an area eligible for Local Economic Revitalization Tax Assistance (LERTA) and that associated property improvements are represented accurately.

_____	_____	_____	_____
Name	Title	Signature	Date

**County Verification**

I certify, to the best of my knowledge, that the location and associated improvements of the above-referenced property are eligible for tax abatement under the Local Economic Revitalization Tax Assistance (LERTA) Program.

_____	_____	_____	_____
Name	Title	Signature	Date