



**Application for Real Property  
Tax Exemption for Capital  
Improvements to Residential  
New Construction Creating  
Accessory Dwelling Units**  
Real Property Tax Law § 421-p

For more information, see Form RP-421-p-adu-I, *Instructions for Form RP-421-p-adu*.

Name of owners					
Mailing address (number and street - include unit number - or PO Box)			Location of property (street address; include unit number)		
City, village, or post office	State	ZIP code	City, town, or village	State	ZIP code
Phone number			School district		
Email address			Property identification: Tax map number or section/block/lot (see tax bill or assessment roll)		

Mark an **X** in the appropriate boxes.

**Describe the property for which exemption is sought.**

**1a** Prior to the creation of the accessory dwelling units (ADUs), was the property a residential building that was designed and occupied exclusively for residential purposes by one or two families? ..... Yes  No

**1b** Are one or more additional residential dwelling units being created that provide independent living facilities for one or more people? ..... Yes  No

**1c** Nature of capital improvement

Reconstruction  Alteration  Improvement  New construction

**1d** Provide details of the capital improvement and dwelling units:

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**2** Enter the date construction of capital improvement commenced (mmddyyyy) .....

**3** Enter the date you expect to complete the improvement (mmddyyyy) .....

**Certification**

I, \_\_\_\_\_, hereby certify that the information on this application and any accompanying pages constitutes a true statement of facts.

Signature	Date
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**For Assessor's use**

1. Date application filed: \_\_\_\_\_
2. Applicable taxable status date: \_\_\_\_\_
3. Action on application: Approved  Disapproved
4. Assessed valuation of parcel in first year of exemption: \$ \_\_\_\_\_
5. Increase in total assessed valuation in first year of exemption: \$ \_\_\_\_\_
6. Amount of exemption in first year:

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

Assessor's signature	Date
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