

CITY OF CHESTER
Business Improvement Property Tax Abatement
Application

1. Name of Business: _____

2. Location of Business: _____

3. Name and Address of Owner(s) (unless incorporated and if incorporated, name and address of shareholders, and if an LLC name and address of members): _____

4. Phone Number of Business: _____

5. Name and Title of Person Requesting Abatement: _____

If not the owner of the Business, in what capacity is the abatement sought and how will the abatement benefit the Business: _____

6. Brief Explanation of Business's Operation Where Abatement is Being Requested:

7. Length of time abatement is requested: _____

8. Current Number of Employees at This Location: _____

9. Current Total Assessed Valuation at This Location: _____

10. Attach Copy of Annual Report as Exhibit 1.

11. Corporate Registration Number: _____

If other than Corporation, photocopy of registration certificate must be attached as Exhibit 2.

12. Total Number of full-time employees added as a result of the project

(expansion/investment): _____

13. Total Number of part-time employees added as a result of the project

(expansion/investment): _____

14. Total cost of project (expansion/investment): Labor: _____ Material: _____

Construction: _____

I hereby declare and affirm the above information is true and correct to the best of my knowledge.

Signature of Applicant: _____

Address: _____

Telephone: _____

Subscribed and Sworn Before me This _____ day of _____.

Notary Public