



**Vacancy Affidavit
for 10 or more stories**

Appeal Year

Town

Appeal Number

Property Index Number(s)

Owner / Taxpayer

Property Index Number(s)

Owner's Mailing Address

Property Street Address

City

State

Zip

City

State

Zip

Daytime Phone Number

Township

Email Address

This vacancy affidavit is to be used for high-rise buildings or apartment buildings that have 10 or more floors.

I, _____ being first duly sworn on oath state that

I am _____ (*owner or lessee*), and that in said capacity I have sufficient knowledge of the above property to state that for the year _____ the following information is accurate.

Further affiant sayeth not.

Signature of Owner/Lessee

Print Name

Date

Subscribed and sworn before me this _____ day of

_____, _____

Signature of Notary Public

Notary Stamp



**Vacancy Affidavit
 for 10 or more stories**

<p>Total number of:</p> <p><input type="radio"/> Square Feet <input type="radio"/> Units</p> <p>_____</p>	<p>Total number physically vacant and for which no rent was collected:</p> <p><input type="radio"/> Square Feet <input type="radio"/> Units</p> <p>_____</p>
January _____	January _____
February _____	February _____
March _____	March _____
April _____	April _____
May _____	May _____
June _____	June _____
July _____	July _____
August _____	August _____
September _____	September _____
October _____	October _____
November _____	November _____
December _____	December _____
Total _____	Total Vacant _____
	Percent Vacant _____ %

10 Stories and Above
 Percent vacant per floor

1. _____	8. _____	15. _____	22. _____	29. _____	36. _____	43. _____
2. _____	9. _____	16. _____	23. _____	30. _____	37. _____	44. _____
3. _____	10. _____	17. _____	24. _____	31. _____	38. _____	45. _____
4. _____	11. _____	18. _____	25. _____	32. _____	39. _____	46. _____
5. _____	12. _____	19. _____	26. _____	33. _____	40. _____	47. _____
6. _____	13. _____	20. _____	27. _____	34. _____	41. _____	48. _____
7. _____	14. _____	21. _____	28. _____	35. _____	42. _____	49. _____