

APPLICATION FOR A REDUCTION IN THE CERTIFIED REAL PROPERTY MARKET VALUE PURSUANT TO THE ACT OF MAY 22, 1933 (P.L. 853, No. 155) AS AMENDED BY ACT NO. 1984-175, APPROVED OCTOBER 16, 1984		CITY OF PHILADELPHIA OFFICE OF PROPERTY ASSESSMENT Curtis Center - 3rd Floor 601 Walnut Street Philadelphia, PA 19106 Telephone: 215-686-6488		FOR OFFICIAL USE ONLY APPLICATION NUMBER _____ OPA ACCOUNT NUMBER _____ CENSUS TRACT: _____ 20 _____ CERTIFIED M.V. \$ _____ 20 _____ REVISED M.V. \$ _____	
IMPORTANT NOTICE: Read the attached instruction sheet carefully so that you will be aware of your obligations under this act. This application must be submitted to the Office of Property Assessment “within the remainder of the county fiscal year in which the catastrophic loss occurred, or within six months of the date on which the catastrophic loss occurred, whichever time period is longer.”					
1. PROPERTY LOCATION (INCLUDE ZIP CODE)					
2. NAME OF OWNER(S) OF RECORD		3. CURRENT MAILING ADDRESS (INCLUDE ZIP CODE)		4. CONTACT INFORMATION Telephone No. _____ E-Mail Address _____	
5. NAME OF APPLICANT(S)					
6. APPLICANT'S MAILING ADDRESS (IF OTHER THAN OWNER OF RECORD) INCLUDE ZIP CODE				7. APPLICANT'S TELEPHONE NUMBER	
8. DESCRIPTION OF PROPERTY PRIOR TO THE CATASTROPHIC LOSS			9. DATE OF CATASTROPHIC LOSS Month _____ Day _____ Year _____		
10. FULLY DESCRIBE THE CAUSE OF THE CATASTROPHIC LOSS (E.G. FIRE, FLOOD, OTHER)					
11. SPECIFY & DESCRIBE THE EXTENT OF DAMAGE TO THE PROPERTY					
12. SPECIFY & DESCRIBE IMPROVEMENTS MADE, IF ANY, TO THE PROPERTY AFTER THE DATE OF LOSS					
12-A. BUILDING PERMIT NUMBER		12-B. DATE PERMIT ISSUED	12-C. DATE CONSTRUCTION STARTED		12-D. CONSTRUCTION COST
CERTIFICATION I / We hereby declare that I/We have filed the foregoing Application for a Reduction in the 20 _____ Certified Real Property Market Value of the property described above and do hereby certify that the statements made in the foregoing application are true and correct to the best of my/our knowledge, information and belief. I/We understand that false statements made herein are subject to the penalties of the Act of December 6, 1972, P.L. 1482, No. 334, as amended, 18 Pa. C.S.A. § 4904, relating to unsworn falsification to authorities. DATE _____ OWNER OF RECORD DATE _____ OWNER OF RECORD					
FOR USE BY THE OPA					
THIS APPLICATION IS: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED			FOR THE OPA		
			DATE _____		