

POTTER COUNTY ASSESSMENT OFFICE
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Deanna L. Johnston
Director of Tax Claim & Assessment

Jacob W. Ostrom, CPE
Chief Assessor

POTTER COUNTY EXEMPTION APPLICATION

PARCEL NUMBER: _____

CONTROL NUMBER: _____

OWNERS NAME: _____

MAILING ADDRESS: _____

TELEPHONE NUMBER: _____

PROPERTY LOCATION: _____

REASON FOR EXEMPTION: _____

REQUIRED INFORMATION:

A) Deed Reference: DB _____ PG _____

OR

Instrument Number: _____

B) Articles of Incorporation, Charter and By-laws of the owner of the property.

C) A sketch of the property with explanation as to the use of each structure.

D) If the property is vacant, an example as to the current and intended use of the property (if any).

E) If part of the property is leased, a copy of the lease(s), income and expense statements, as well as supplementary data.

F) In the case of charities, the following information:

1) The Federal Form 990-990T (if any) for past two (2) years.

2) The annual financial report of the entity for the past two (2) years.

3) Any application for Tax Exemption filed with the department of revenue, including all attachments.