

NOTE: SASE IS REQUIRED FOR ALL SEARCHES RETURNED BY MAIL

CITY OF OLEAN
P.O.BOX 668
Olean, New York 14760-0668
376-5602

FEE: \$10.00

LOCAL REAL PROPERTY CERTIFICATION

Date _____

Applicant _____

PART I: Applicant to complete

ASSESSED TO _____
PROPERTY ADDRESS _____
Account # _____

(may be obtained from Assessor's Office)
CORNER PROPERTY? Yes _____ No _____ If yes, list cross street _____

KNOWN AS ANY OTHER ADDRESS? Yes _____ No _____
List _____

PROPERTY IS: (v) Single Family Residential _____
Two Family Residential _____ Commercial _____
3 or More Families _____ Boarding House _____

PART II (City Clerk to Compete)

If "None", certifying officer will insert "None"

CITY TAXES _____ PAID / UNPAID (circle one)
COUNTY TAXES - **SEE COUNTY – CITY NO LONGER HAS ACCESS**

SIDEWALK / PAVING / SEWER ASSESSMENTS PROJ. # _____ YR. OF LEVY DURATION _____
NEXT INSTALLMENT DUE _____
(This does NOT include any assessments currently being completed but not yet billed.)

UNPAID BALANCE _____ DELINQUENT BALANCE _____
OTHER ASSESSMENT(S) _____
OTHER LIENS (excluding judgement liens) _____
CONTRACT LIABILITIES _____
DATE: _____

CITY CLERK

PART III Water and Sewer Dept to complete

If "None", certifying officer will insert "None"

UNPAID WATER / SEWER RENT _____

METER REPAIR / REPLACEMENT _____

DATE: _____

WATER AND SEWER DEPARTMENT

Note: The certification of this Department is as of the date stated and including only bills actually rendered prior to date of certification. Final bills are rendered the month of the reading:

PART IV (Department of Public Works to complete)

SIDEWALK REPAIRS NEEDED & OWNER NOTIFIED YES NO (circle one)
TREE REMOVAL NEEDED & OWNER NOTIFIED YES NO (circle one)
UNPAID SHOVELING FEES \$ _____

DATE: _____

DEPARTMENT OF PUBLIC WORKS