

**APPLICATION FOR CONDOMINIUM  
APPORTIONMENT AND APPROVAL****SECTION A: PROPERTY INFORMATION**

Borough: \_\_\_\_\_ Block: \_\_\_\_\_ Present Lot(s): \_\_\_\_\_

1. Number of Lots Requested: \_\_\_\_\_

2. Name of Condominium: \_\_\_\_\_

3. Property Address: \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE4. New Lot(s) Usage (check one): ☐ Residential ☐ Commercial ☐ Mix (Residential & Commercial)**DO NOT WRITE IN THIS SPACE - FOR OFFICE USE ONLY**

Condo #: \_\_\_\_\_ New Lot #: \_\_\_\_\_

**SECTION B: SPONSOR INFORMATION**1a. Sponsor(s)/  
Declarant: \_\_\_\_\_Mailing  
Address: \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODEb. Sponsor(s)/  
Declarant: \_\_\_\_\_Mailing  
Address: \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODEc. Sponsor(s)/  
Declarant: \_\_\_\_\_Mailing  
Address: \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE2. Sponsor is a (check one): ☐ Individual ☐ Corporation ☐ Partnership ☐ LLC  
☐ Other. Please specify: \_\_\_\_\_

Finance will use this mailing address for all real estate bills until the sponsor/declarant transfers each individual condominium unit.

**SECTION C: CERTIFICATION***The applicant hereby certifies that, in making this application for Condominium Apportionment and Approval, s/he is the owner, or acting under the direction of the owner.*1. Applicant's Name: \_\_\_\_\_  
LAST NAME FIRST NAME2. Address: \_\_\_\_\_ 3. Phone Number \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE

4. Email Address: \_\_\_\_\_ 5. Relationship to Sponsor/Declarant \_\_\_\_\_

6. Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**TAX MAP CHANGE WILL NOT BE MADE UNTIL PRESENTATION OF REQUIRED DOCUMENTS (see reverse for the required documents)****DRAW SKETCH TO SCALE 1" = 50', IF POSSIBLE INDICATE NORTH ARROW**

(Architect or Engineer's seal)

Tax Map Unit Staff: \_\_\_\_\_ Date: \_\_\_\_\_