

ANNUAL CERTIFICATION OF COMPLIANCE
FOR FIVE YEAR TAX AGREEMENT

CITY OF MILLVILLE
Municipality

CUMBERLAND
County

Please Print:

Applicant

Block

Lot

Qual.

Business Name

Property Location

Calendar Year

Please answer the following questions to verify that all criteria has been met, as of October 1st of the calendar year, as required by the Five Year Tax Agreement.

Check One

1. Has the ownership changed subsequent to the agreement?

Yes

No

If the answer is Yes, please indicate the new owner's information below.

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Name

Mailing Address

City, State

Zip Code

2. Does the project continue to be a commercial or industrial use?

Yes

No

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3. Does the project continue to maintain or provide gainful employment within the municipality?

Yes

No

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of Employees

Prior to the Project

of Current Employees,

as of October 1st

**List of Employees Required*

4. Has there been any changes to the material facts contained within the original application?

Yes

No

If the answer is Yes, please indicate those changes below.

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I certify that the foregoing statements made by me are true and that if any of the foregoing statements made by me are willfully false will result in the termination of the Five Year Tax Agreement.

Date

Signature of Applicant

This certification must be submitted to the Assessor on or before December 1st of the calendar year. Failure to submit a completed certification will result in the termination of the Five Year Tax Agreement.