

# Historic Barn Rehabilitation Tax Credit Application



New York State  
Parks, Recreation and  
Historic Preservation

*New York State offers the credit based on New York State Consolidated Tax Law- Article 11: Part 1: Section 606.*

## PART 1 & 2

*(Please refer to the Application Instructions before completing)*

**1. Address of Property:** \_\_\_\_\_

City/Town/Village: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

**2. Owner:** Name(s): \_\_\_\_\_

Mailing Address (if different than property): \_\_\_\_\_

City/Town/Village: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### 3. Checklist (Required unless otherwise noted):

**A. Program Qualification Requirements** (*see Application Instructions*)

- Was the barn constructed before 1946? Yes  No
- Is the barn a contributing State or National Register listed property? Yes  No
- Was the barn originally used for purposes related to agriculture? Yes  No
- *OPTIONAL:* Is the barn currently used for purposes related to agriculture? Yes  No
- Was the barn recently (within the last year) used for residential purposes? Yes  No
- Will the barn be converted to residential purposes? Yes  No
- Will the project materially alter the historic appearance of the barn? Yes  No
- Will the project cost \$5,000 or more? Yes  No

**B. Total estimated project cost** \$ \_\_\_\_\_

**C. I have enclosed:**

- Exterior photos of all visible elevations of the barn
- Photos of all areas where work will be or has been completed
- If work has been completed, photos of the barn taken prior to the work beginning
- Project worksheet(s) describing proposed work (*if work has already been completed, submit Part 1&2 and Part 3 applications together and only the Part 3 project worksheet*). *Work completed within the last five years may qualify.*
- Manufacturer's Product information (if applicable to the project)

**D. I give permission to share submitted images for program promotion** Yes  No

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**4. Disclaimer:**

The New York State Office of Parks, Recreation and Historic Preservation (OPRHP) does not provide legal, tax or accounting advice; the information provided is intended to be general in nature; and tax credit applicants are strongly encouraged to consult their own professional tax, accounting and legal advisors on individual tax matters. OPRHP is not responsible for the information or advice provided as it may affect the specific tax consequences to any individual (including sole proprietor), corporate, partnership, estate or trust taxpayer, which will depend on many other facts and circumstances. The information is for the general benefit of persons interested in obtaining certifications from OPRHP that may allow them to qualify for state historic properties tax credits. This information cannot be expected to be completely current, and it represents a good faith effort to reference controlling laws and regulations as accurately as possible.

**I have read the above statement      Initial here: \_\_\_\_\_**

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**5. Signatures: Original signatures are needed, scanned or copied forms will not be accepted**

*(If more than two owners, attach a sheet with the additional owner's signature(s) and date(s))*

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner (2) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>FOR STATE USE ONLY</b>	<b>Project Number:</b> _____
<input type="checkbox"/> <b>The barn meets the program qualification requirements, and the project will not materially alter the historic appearance of the barn.</b>	
Reviewer Signature: _____ Date: _____	
Reviewer Email Address: _____	
<b>Comments:</b>   	

*The above certification means that you may start the project as described. Please feel free to contact your project reviewer with any questions. Once your project is complete, please submit the Part 3 application.*

**Mail completed form to:      OPRHP  
P.O. Box 189  
Waterford, NY 12188**

**Part 2 - Project Work Sheet** (Print and complete additional sheets as needed)

\*Please note that costs indicated in the Part 2 work sheet can be approximated values of the anticipated expenditures provided by the applicant. Contractor estimates are not required for Part 2 approval. Final costs will be submitted with the Part 3.

<b>Photo #</b> <small>(Key photos to barn floorplans if they are submitted)</small>	<b>Title of Work Proposed</b>	<b>Existing Condition</b>	<b>Proposed Work</b>	<b>Estimated Cost*</b>
Total Estimated Cost:				

**Part 2 - Project Work Sheet continued**

<b>Photo #</b> <small>(Key photos to barn floorplans if they are submitted)</small>	<b>Title of Work Proposed</b>	<b>Existing Condition</b>	<b>Proposed Work</b>	<b>Estimated Cost*</b>
Total Estimated Cost:				