



CITY OF LONG BEACH
DEPARTMENT OF ASSESSMENT
1 WEST CHESTER STREET
LONG BEACH, NEW YORK 11561
(516) 431-1009
FAX: (516) 431-1343

PEGGY F. FRASER
ASSESSOR

File between September 1st and November 30th

AFFIDAVIT

Being duly sworn states that:

PRINT NAME

In accordance with Real Property Tax Law 460, I am a resident of the State of New York, and

My legal primary residence is _____ *City of Long Beach.*
ADDRESS

I have submitted with this affidavit a copy of any two of the following identifications:

- 1) Copy of the most current NYS Income Tax Return*
- 2) Current Car Registration*
- 3) Current Car Insurance card*

SIGNATURE

Sworn to before me this _____ *day*
of _____, *20* _____

Notary Public