

# Jefferson County Real Property Tax Services

175 Arsenal Street  
Watertown, NY 13601



No. _____
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## CERTIFICATE OF COUNTY DIRECTOR OF REAL PROPERTY TAX SERVICES THAT FEE AUTHORIZED BY REAL PROPERTY TAX LAW SECTION 503 SUBD.7, IF ANY, HAS BEEN PAID

The Jefferson County Board of Supervisors enacted resolution no. 350 on January 1, 1993 authorizing fees as set forth in Real Property Tax Law Section 503 subd. 7. I have reviewed the attached document and collected the fee as set forth below:

- ( ) No fee required since document does not necessitate a change upon a tax map.
- ( ) Tax Map Alteration Only - \$ 25
- ( ) One through three lot subdivision map Original - \$ 25
- ( ) One through three lot subdivision map Alteration - \$ 25
- ( ) One through three lot subdivision map Abandonment - \$ 25
- ( ) One through three lot Condominium map - \$ 25
- ( ) Four through nine lot subdivision map Original - \$ 50
- ( ) Four through nine lot subdivision map Alteration - \$ 50
- ( ) Four through nine lot subdivision map Abandonment - \$ 50
- ( ) Four through nine lot Condominium map - \$ 50
- ( ) Ten or more lot subdivision map Original - \$ 100
- ( ) Ten or more lot subdivision map Alteration - \$ 100
- ( ) Ten or more lot subdivision map Abandonment - \$ 100
- ( ) Ten or more lot Condominium map - \$ 100

Name or Title of Map: \_\_\_\_\_

\_\_\_\_\_ Tax Map ID Number: \_\_\_\_\_

Date of Map: \_\_\_\_\_ Last Revision Date: \_\_\_\_\_ Town: \_\_\_\_\_

Map Prepared By: \_\_\_\_\_ File No. \_\_\_\_\_

\*Current Owner: \_\_\_\_\_

Person Presenting Map for Filing: \_\_\_\_\_

Contact Person For Questions: \_\_\_\_\_ Telephone: \_\_\_\_\_

Jefferson County Clerk Filing Information: \_\_\_\_\_

This certificate only approves the document with respect to compliance with Real Property Tax Law Section 503 subd. 7. No other approval as to completeness, legality, compliance with any local or state statutes or regulations or any other approval or requirements for processing by this department, shall be deemed satisfied by this certificate.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature

Credit Card TID# \_\_\_\_\_

Cash       Check # \_\_\_\_\_

\* Subdivision Map Only

Revised 7/2014