

Checklist for Deconversion Incentive Town/Village of East Rochester

Address of Property _____

Tax ID Number _____

Name of Owner(s) _____

Task	Party Responsible	Date	Signed
Initial Inspection (certifies that property is qualified)	Building Inspector		
Deconversion (to Building Inspector's specifications)	Owner(s)		
Final Inspection (certifies that property is now single family)	Building Inspector		
Adjustment to tax rolls completed	Assessor		
Signing of commitments (attached)	Owners(s)		