

# PREPARATION OF LOCAL PROPERTY TAX LIST AND DUPLICATE FOR TAX ASSESSORS & TAX COLLECTORS

**OCTOBER 21, 2016, NJ LAW CENTER, NEW BRUNSWICK, NJ**

Approved by DCA for CTCs 5 CEUs 2 Legislation and , 3 Reporting/Billing/Collections  
Approved by State of NJ, Division of Taxation for 4 CEUs in Property Tax Administration  
Approved for CPAs, RMAs, PAs and PSAs – 5 CPEs in Taxation

The Seminar will provide Four (4) credit hours in Property Tax Administration for Tax Assessors

8:30am – 9:00 am Registration, **HOT BUFFET BREAKFAST**

9:00am – 1:10 pm Seminar Timetable

Insertion of Property Classification Code on Line Items

Property Classifications with Definitions

Tax List Page Summaries; Recapitulation of Property

Insertion of Building Description Code on Line Items

Separate Line Item for Farm Property Assessment

Veteran, Senior Citizen, Disabled Citizen and Surviving Spouse Deductions

Tax List and Instructions

Legislative Update

Instructor: Jay R. Schwartz, M.P.A., C.T.A. – *Tax Administrator*  
Passaic County Board of Taxation,

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Directions on our web site – "<http://ipd2.com>"

TO ASSURE PROPER POSTING, PLEASE ATTACH A COPY OF THIS APPLICATION WITH YOUR PAYMENT

Mail Checks to: Institute For Professional Development, PO Box 1468 Clifton, NJ 07015 (973)-777-4200

\_\_\_\_\_ I wish to register for the October 21, 2016 TaxCollectors/Assessors Seminar

No One Will Be Permitted Without Purchase Order or Payment By Day of Seminar P.O. # \_\_\_\_\_

**FAX YOUR REGISTRATION FORM TO (973)-777-0401**

Cancellation Policy – 48 Hrs in advance of seminar, in writing\* During inclement Weather, Call day before

SEMINAR INCLUDES HOT BUFFET BREAKFAST \$ 99.00 per person Registration At Door \$ 125.00

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

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Organization or Government Unit

Telephone Number

Fax Number

### CLAIMANTS CERTIFICATION & DECLARATION

I do solemnly declare and certify under the penalty of the law  
That the within bill is correct in all particulars, the articles  
Have been furnished or services rendered as stated herein, that  
no bonus has been given or received by any person or persons  
within knowledge of this claimant in connection with the above  
Claim and that the amount charged is a reasonable one.

*Michael F. Conti*

Michael F. Conti, Program Coordinator

P.O. Box 1468, Clifton, NJ 07015-1468 (973)-777-4200 - FAX (973) 777-0401

Just mail your check with this application form  
you do not need to send your Voucher for a separate  
signature since the presigned certification  
on the left can be attached to your Voucher in lieu  
of sending it to us for a signature. This form has  
been determined by DLGS to meet the requirement  
of the statutes for this type of expenditure.