

ANDREW M. CUOMO Governor HOWARD A. ZUCKER, M.D., J.D. Commissioner SALLY DRESLIN, M.S., R.N. Executive Deputy Commissioner

Please read these instructions in order to properly complete your submission of Real Estate Taxes, Common Area Maintenance Charges, and Co-op Fees

1) Please fill in your agency name and 5-digit Corp ID

2) Please enter the site address (ie 123 State Road) for all sites you are submitting information for.

3) Select the program type for each site using the drop-down box.

4) Enter the unique 7-digit Operating Certificate for each site.

5) If you are an agency that is reimbursed on a fiscal year period (NYC agencies), please enter the time period as 7/1/XX - 6/30/XX.

If you are an agency that is reimbursed on a calendar year period (Upstate and Long Island agencies), please enter the time period as 1/1/XX - 12/31/XX.

6) Enter the Real Estate Tax amount you are seeking reimbursement for. Please note that accompanying submission of all supporting documentation is required, and that real estate taxes are only reimbursable when noted as such on the PPA.

7) Enter the CAM Charges amount you are seeking reimbursement for. Please note that accompanying submission of all supporting documentation is required, and that CAM Charges are only reimbursable when noted as such on the PPA.

8) Enter the Co-Op Condo Fees amount you are seeking reimbursement for. Please note that accompanying submission of all supporting documentation is required, and that Co-op Condo Fees are only reimbursable when noted as such on the PPA.

Before submitting this worksheet, please check that none of the below items are included in the amounts entered for reimbursement

The following items are reimbursed via your CFR. As such, they are excluded from property reimbursement. Please do not include:

- Liability Insurance
- Property Insurance
- Supplies and Materials
- Housekeeping Costs
- Repairs and Maintenance**
- Food Costs
- Utilities, including:
 - Electricity
 - o Heat
 - o Water
 - o Sewage

**The CFR-1 allows the reporting of small repair and maintenance projects, as well as contracted services. Anything reported on your CFR should be omitted from this form.

Please Submit to pcv@health.ny.gov