FOR CITY USE ONLY REAL PROPERTY TRANSFER REPORT C1. County Code C2. Date Deed Recorded STATE BOARD OF REAL PROPERTY SERVICES C4. Page C3. Book **RP - 5217NYC** OR C5. CRFN (Rev 11/2002) **PROPERTY INFORMATION** 1. Property Location 2. Buver Name LAST NAME / COMPANY FIRST NAME AST NAME / COMPAN FIRST NAME Indicate where future Tax Bills are to be sent 3. Tax if other than buyer address (at bottom of form) Billina LAST NAME / COMPANY FIRST NAME Address CITY OR TOWN STREET NUMBER AND STREET NAME 4. Indicate the number of Assessment 4A. Planning Board Approval - N/A for NYC of Parcels OR Part of a Parcel Roll parcels transferred on the deed 4B. Agricultural District Notice - N/A for NYC Check the boxes below as they apply: 5. Deed 6. Ownership Type is Condominium Property Size 7. New Construction on Vacant Land 8. Seller LAST NAME / COMPANY FIRST NAME Name LAST NAME / COMPAN 9. Check the box below which most accurately describes the use of the property at the time of sale: Commercial One Family Residential Residential Vacant Land G Entertainment / Amusement Industrial C Е 2 or 3 Family Residential Non-Residential Vacant Land Community Service Public Service В F D 14. Check one or more of these conditions as applicable to transfer: SALE INFORMATION Sale Between Relatives or Former Relatives Α 10. Sale Contract Date Sale Between Related Companies or Partners in Business В C One of the Buyers is also a Seller 11. Date of Sale / Transfer D Buyer or Seller is Government Agency or Lending Institution Month Day Year Ē Deed Type not Warranty or Bargain and Sale (Specify Below) F Sale of Fractional or Less than Fee Interest (Specify Below) 12. Full Sale Price G Significant Change in Property Between Taxable Status and Sale Dates (Full Sale Price is the total amount paid for the property including personal property. Н Sale of Business is Included in Sale Price This payment may be in the form of cash, other property or goods, or the assumption of Other Unusual Factors Affecting Sale Price (Specify Below) Ι mortgages or other obligations.) Please round to the nearest whole dollar amount. None 13. Indicate the value of personal property included in the sale ASSESSMENT INFORMATION Data should reflect the latest Final Assessment Roll and Tax Bill 15. Building Class 16. Total Assessed Value (of all parcels in transfer) 17. Borough, Block and Lot / Roll Identifier(s) (If more than three, attach sheet with additional identifier(s)) CERTIFICATION I certify that all of the items of information entered on this form are true and correct (to the best of my knowledge and belief) and I understand that the making of any willful false statement of material fact herein will subject me to the provisions of the penal law relative to the making and filing of false instruments. **BUYER'S ATTORNEY** BUYER SIGNATURE DATE LAST NAME FIRST NAME STREET NUMBER STREET NAME (AFTER SALE) AREA CODE TELEPHONE NUMBER **SELLER** STATE CITY OR TOWN ZIP CODE SELLER SIGNATURE DATE