

FILL OUT ALL SECTIONS OF THIS FORM BEFORE FILING WITH THE COUNTY CLERK  
AND FIDUCIARY CLERK/COURT – MUST BE COMPLETED WITHIN 30 DAYS OF SALE  
*If this is an E-Filed case, upload this form to NYSCEF as a "Foreclosure Action Surplus Monies Form"*

## **FORECLOSURE ACTION SURPLUS MONIES FORM**

SUPREME COURT/COUNTY COURT OF THE STATE OF NEW YORK:

COUNTY OF \_\_\_\_\_

METROPOLITAN LIFE INSURANCE  
COMPANY

Index No. 817483/2022B

Plaintiff,

MORTGAGED PROPERTY:

600-602 Clarence Avenue, Unit 1A

-against-

MAN YI CINDY NG, ET AL

Defendant.

COUNTY: \_\_\_\_\_

SBL #: 5486 and Lot 1001

Sale Date: 12/8/25

### **A. To be completed by the Referee**

1. Final Judgment Amount per Judgment: \$ 614,051.68

2. Adjusted Judgment Amount (Upset Price): \$ 549,000

(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)

3. Sale Price: \$ \$1,000

(To calculate if there is a surplus, subtract the higher of line 1 or line 2 from line 3 and enter any surplus on line 4)

4. Surplus Amount (enter \$0.00 if no surplus) \$ 0

\*\*If there are surplus funds, attach proof/receipt that the surplus amount was deposited with the  
Treasurer, Comptroller, Commissioner of Finance, Clerk of Court, etc.

Referee's TOTAL compensation awarded/fees  
earned in this matter:

\$ \_\_\_\_\_  
Telephone: (516) 644-6769  
Address: 706 Bemestien Way, Westbury, NY 11590  
Email: Scott.Siller@nycourts.gov  
Signature/Date: 12/8/25

Referee Name: Scott H. Siller, Esq.  
Address: 706 Bemestien Way, Westbury, NY 11590  
Email: Scott.Siller@nycourts.gov  
\*If plaintiff is also the purchaser, complete both B. and C.

### **B. To be completed by Plaintiff's Rep.**

METROPOLITAN LIFE INSURANCE CO.  
c/o Friedman Vartolo LLP,  
85 Broad Street, Suite 501,  
New York, New York 10004,

Email: \_\_\_\_\_

Signature/Date: \_\_\_\_\_

### **C. To Be Completed by Purchaser**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature/ Date: \_\_\_\_\_