

**CITY OF HIGHLAND PARK
REAL ESTATE TRANSFER DISCLOSURE STATEMENT**

Property: _____, Highland Park, Illinois 60035 Full Actual Consideration: \$ _____

Pursuant to the Chapter 97, Article X of the Highland Park City Code, upon the transfer of the real property identified on this Disclosure Statement, the Transferees (Buyers) may be, or become, responsible for certain obligations to the City of Highland Park that are related to the subject property, whether known or unknown to any or all of the Transferors (Sellers). These obligations may include, without limitation, the following:

| Potential Obligation | Responsible City Department |
|---------------------------------|---|
| Open Building Permits | Building Division |
| Unpaid Fines | City Clerk |
| Open Code Enforcement Issues | Fire, Public Works, and Police Departments; Building Division |
| Recapture Agreements | Public Works Department |
| Address Changes | Fire Department |
| Fire Alarms | Fire Department |
| Resale of Restricted Properties | Planning Division |
| Demolition Tax Exemptions | Building Division |

Inquiries related to the obligations listed above should be directed to the corresponding responsible City Department or Division at the following telephone numbers:

| City Department / Division | Telephone Number |
|----------------------------|------------------|
| Building Division | (847) 432-0808 |
| City Clerk | (847) 926-1034 |
| Fire Department | (847) 433-3110 |
| Planning Division | (847) 432-0867 |
| Police Department | (847) 432-7730 |
| Public Works Department | (847) 432-0807 |

Each of the undersigned hereby certifies that the Full Actual Consideration stated above is true and correct, and that he/she understands this Statement and executes it of his/her own free will and without any reservation whatsoever.

THIS DISCLOSURE STATEMENT MUST BE SIGNED BY ALL OF THE TRANSFERORS AND TRANSFEREES OF THE SUBJECT PROPERTY, OR BY THEIR RESPECTIVE ATTORNEYS. ALL SIGNATURES MUST BE NOTARIZED.

TRANSFERORS:

Signature: _____

Print Name: _____

Date: _____

Signature: _____

Print Name: _____

Date: _____

TRANSFEREES:

Signature: _____

Print Name: _____

Date: _____

Signature: _____

Print Name: _____

Date: _____

(Insert additional signature pages if necessary)

ACKNOWLEDGMENTS

STATE OF ILLINOIS)
) SS.
COUNTY OF _____)

This instrument was acknowledged before me on _____, 20__, by _____.

Given under my hand and official seal this ____ day of _____, 20__.

Notary Public

My Commission expires: _____

STATE OF ILLINOIS)
) SS.
COUNTY OF _____)

This instrument was acknowledged before me on _____, 20__, by _____.

Given under my hand and official seal this ____ day of _____, 20__.

Notary Public

My Commission expires: _____

STATE OF ILLINOIS)
) SS.
COUNTY OF _____)

This instrument was acknowledged before me on _____, 20__, by _____.

Given under my hand and official seal this ____ day of _____, 20__.

Notary Public

My Commission expires: _____