

Stamp # and Date

Check Appropriate Box(es)	[Recorder or Registrar's
() Residential () Commercial () Multi-Unit		Deed No.
() Declaration () Exemption () Land Trus		Date Recorded (For Recorder's Use Only)
INSTRUCTIONS: 1. This form must be filled out completely, signed to the grantors (sellers), and presented to the Find the time of purchase of the real estate transfers ordinance. The stamps must be affixed to the disconnection.	ance Department, 1000 Civic C stamps as required by the Villag	buyers), or signed by at least one of enter Drive, Niles, Illinois 60714 at e of Niles Real Estate Transfer Tax
 The full actual amount of consideration of the tra the full actual consideration of the transaction a declaration. 	insaction is the amount upon whand the amount of the tax stam	ich the tax is to be computed. Both ps required must be stated on the
3. A signed copy of the real estate contract must be	presented with this declaration	form.
4. For additional information, please call the Finant to 5:00 p.m.	ce Department at 847-588-8000	, Monday through Friday, 8:30 a.m.
PROPER	RTY INFORMATION	
Address of Property:		60714
Number	Street	Zip Code
Permanent Property Index No.:		
Date of Deed://	Type of Deed	
Full Actual Consideration: \$(Include amount of mortgage and value of liabilities	s assumed)	
CA	LCULATION	
AMOUNT OF TAX (\$3.00 per \$1,000 or fraction the	ereof of full actual consideration): \$
EXEMPT STAMP ADMIN FEE (\$25	\$	
OCCUPANCY PERMIT FEE (\$25.0	\$	
	TOTAL TAX AND FEES	: \$
The Village of Niles Real Estate Transfer Tax Ordinar exemptions are enumerated in Sections 94-32 and 94 form. To claim one of these exemptions, complete the I hereby declare that this transaction is exempt from paragraph(s) of Section	L-33 of the Ordinance which are appropriate blanks below: taxation under the Niles Real of said Ordinance.	printed on the reverse side of this
We hereby declare the full actual consideration and ab	ove facts contained in this decla	ration to be true and correct.
GRANTOR: (Please print)		
Name	Address	Zip Code
Signature - Seller or Agent	Date Signed	
GRANTEE: (Please print)	•	
Name	Address	Zip Code
Signature - Buyer or Agent	Date Signed	

Village of Viles

1000 Civic Center Drive, Niles, Illinois 60714
Telephone (847) 588-8000 Fax (847) 588-8050

INFORMATION FOR TRANSFER STAMPS

DATE://		☐ EXEMPT TRANSACTION			
PROPERTY ADDRESS: _		· · · · · · · · · · · · · · · · · · ·			
PIN#				····	
BUYER'S NAME:		,			
			CELL PHONE:		
OWNER OCCUPIED:		ES 🗖 NO			
IF NOT, CURRENT ADDR	ESS:				
TYPE OF PROPERTY:		SINGLE-FAMILY			
		MULTI-FAMILY	(list	# of units)	
		TOWNHOUSE/CONDO	MUINIMC		
		COMMERCIAL			
		INDUSTRIAL			
		RENTAL		(list type)	
		NEW CONSTRUCTION	N		
I hereby certify that the abo	ve stater	ments are true and corre	ect.		
BUYER'S NAME:	(Prir	nt)	DATE:		<i></i>
BUYER'S NAME:		•	DATE:		/