

FOR COUNTY USE ONLY

C1. SWIS Code

\_\_\_\_\_

C2. Date Deed Recorded

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

C3. Book

\_\_\_\_\_

C4. Page

\_\_\_\_\_



New York State Department of Taxation and Finance

Office of Real Property Tax Services

RP- 5217-PDF

Real Property Transfer Report (8/10)

PROPERTY INFORMATION

Clear Form

1. Property Location

\* STREET NUMBER

\* STREET NAME

\* CITY OR TOWN

VILLAGE

\* ZIP CODE

2. Buyer Name

\* LAST NAME/COMPANY

FIRST NAME

LAST NAME/COMPANY

FIRST NAME

3. Tax Billing Address

Indicate where future Tax Bills are to be sent if other than buyer address(at bottom of form)

LAST NAME/COMPANY

FIRST NAME

STREET NUMBER AND NAME

CITY OR TOWN

STATE

ZIP CODE

4. Indicate the number of Assessment Roll parcels transferred on the deed \_\_\_\_\_ # of Parcels

OR  Part of a Parcel

(Only if Part of a Parcel) Check as they apply:

4A. Planning Board with Subdivision Authority Exists

4B. Subdivision Approval was Required for Transfer

4C. Parcel Approved for Subdivision with Map Provided

5. Deed Property Size \_\_\_\_\_ X \_\_\_\_\_ OR \_\_\_\_\_  
\* FRONT FEET \* DEPTH \*ACRES

6. Seller Name

\* LAST NAME/COMPANY

FIRST NAME

LAST NAME/COMPANY

FIRST NAME

\*7. Select the description which most accurately describes the use of the property at the time of sale:

Check the boxes below as they apply:

8. Ownership Type is Condominium

9. New Construction on a Vacant Land

10A. Property Located within an Agricultural District

10B. Buyer received a disclosure notice indicating that the property is in an Agricultural District

SALE INFORMATION

11. Sale Contract Date \_\_\_\_\_

\* 12. Date of Sale/Transfer \_\_\_\_\_

\*13. Full Sale Price \_\_\_\_\_ .00

( Full Sale Price is the total amount paid for the property including personal property. This payment may be in the form of cash, other property or goods, or the assumption of mortgages or other obligations.) Please round to the nearest whole dollar amount.

14. Indicate the value of personal property included in the sale \_\_\_\_\_ .00

15. Check one or more of these conditions as applicable to transfer:

- A. Sale Between Relatives or Former Relatives
- B. Sale between Related Companies or Partners in Business.
- C. One of the Buyers is also a Seller
- D. Buyer or Seller is Government Agency or Lending Institution
- E. Deed Type not Warranty or Bargain and Sale (Specify Below)
- F. Sale of Fractional or Less than Fee Interest (Specify Below)
- G. Significant Change in Property Between Taxable Status and Sale Dates
- H. Sale of Business is Included in Sale Price
- I. Other Unusual Factors Affecting Sale Price (Specify Below)
- J. None

Comment(s) on Condition: \_\_\_\_\_

ASSESSMENT INFORMATION - Data should reflect the latest Final Assessment Roll and Tax Bill

16. Year of Assessment Roll from which information taken(YY) \_\_\_\_\_

\*17. Total Assessed Value \_\_\_\_\_

\*18. Property Class \_\_\_\_\_

\*19. School District Name \_\_\_\_\_

\*20. Tax Map Identifier(s)/Roll Identifier(s) (If more than four, 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 subject me to the provisions of the penal law relative to the making and filing of false instruments.

SELLER SIGNATURE

BUYER CONTACT INFORMATION

(Enter information for the buyer. Note: If buyer is LLC,society, association, corporation, joint stock company, estate or entity that is not an individual agent or fiduciary, then a name and contact information of an individual/responsible party who can answer questions regarding the transfer must be entered. Type or print clearly.)

SELLER SIGNATURE

DATE

BUYER SIGNATURE

BUYER SIGNATURE

DATE

\* LAST NAME

FIRST NAME

\*AREA CODE

\*TELEPHONE NUMBER (Ex: 9999999)

\* STREET NUMBER

\* STREET NAME

\*CITY OR TOWN

\*STATE

\*ZIP CODE

BUYER'S ATTORNEY

LAST NAME

FIRST NAME

AREA CODE

TELEPHONE NUMBER (Ex: 9999999)

