



CITY OF YONKERS

REAL PROPERTY TRANSFER TAX RETURN

FINANCE DEPARTMENT

PURSUANT TO CHAPTER 15 TAXES, ARTICLE V, GENERAL ORDINANCE 8-1973 AS AMENDED BY G.O. 4-1984, G.O. 10-1989, G.O. 3-1998 AND G.O. 7-2005

Please Print

(Grantor) _____

NAME

ADDRESS

ZIP CODE

(Grantee) _____

NAME

ADDRESS

ZIP CODE

(Grantor's Att'y) _____

NAME

ADDRESS

ZIP CODE

(Grantee's Att'y) _____

NAME

ADDRESS

ZIP CODE

NOTE: FILING OF THIS RETURN DOES NOT CONSTITUTE NOTICE TO THE CITY OF YONKERS TO CHANGE THE ADDRESS FOR PROPERTY TAXES. PROPERTY OWNERS MUST PROVIDE A WRITTEN NOTICE ADVISING THE CITY OF CORRECT NAME AND MAILING ADDRESS. SEND INFORMATION TO:

CITY OF YONKERS
ROOM 401
87 NEPPERHAN AVENUE
YONKERS, N.Y. 10701

LOCATION OF PROPERTY TRANSFERRED

Address _____

FOR DEPARTMENT USE ONLY

City Tax Map _____ Section _____ Block _____ Lot _____

DATE OF DELIVERY OF DEED TO GRANTEE _____

COMPUTATION OF TAX

NOTES:

1. If item 1 is \$25,000 or less, enter zero in items 3 and 5. If exemption is claimed, attach signed affidavit showing grounds for exemption.
2. Where the transfer is by a corporation in liquidation or to a corporation in exchange for capital stock, complete Schedule B on Page 2.

1. Total Consideration Paid or Required to Be Paid		
2. Allocated Consideration Subject to Tax (Schedule A)		
3. Tax Due - 1.5% of Item 1 or 2 Whichever is Applicable		\$0.00
4. Add - Penalty and Interest		
5. Total Tax, Penalty and Interest Due		\$0.00

MAKE CERTIFIED CHECK PAYABLE TO **THE CITY OF YONKERS**
CITY HALL - ROOM 210, 40 SOUTH BROADWAY, YONKERS, NEW YORK 10701

AFFIDAVIT OF GRANTOR

I swear (or affirm) that this return including the accompanying schedules or statements, has been examined by me, and is, to the best of my knowledge and belief, a true and complete return, made in good faith, pursuant to Chapter 15, Article V, of the General Ordinance 8-1973 as amended by G.O. 4-1984, G.O. 10-1989, G.O. 3-1998 and G.O. 7-2005

Sworn to and subscribed to before me this _____ day of _____

(Name of Grantor)

(Signature of Officer Administering Oath)

(Signature of owner, partner, officer of corporation, etc.)

AFFIDAVIT OF GRANTEE

I swear (or affirm) that this return including the accompanying schedules or statements, has been examined by me, and is, to the best of my knowledge and belief, a true and complete return, made in good faith, pursuant to Chapter 15, Article V of the General Ordinance 8-1973 as amended by G.O. 4-1984, G.O. 10-1989, G.O. 3-1998 and G.O. 7-2005.

Sworn to and subscribed to before me this _____ day of _____

(Name of Grantor)

(Signature of Officer Administering Oath)

(Signature of owner, partner, officer of corporation, etc.)