



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

| | | |
|---|--|--|
| (Grantor:) _____ <small>Name</small> | MAKE CERTIFIED CHECK PAYABLE TO CITY OF YONKERS CITY HALL – TAX OFFICE ROOM 108 40 SOUTH BROADWAY, YONKERS, NY 10701 Wiring information: Sterling National Bank Getty Square Office 61 South Broadway Yonkers NY 10701 ACCOUNT NAME: City of Yonkers Transfer Tax ABA#021909300 ACCOUNT # 0324910701 Email paperwork To: Transfertax@YonkersNY.gov | |
| Address _____ <small>City State Zip</small> | | |
| (Grantee) _____ <small>Name</small> | | |
| Address _____ <small>City State Zip</small> | | |
| (Grantor's Att'y) _____ <small>Name Address City State Zip</small> | NOTE: FILING OF THIS RETURN DOES NOT CONSTITUTE NOTICE TO THE CITY OF YONKERS TO CHANGE THE ADDRESS FOR PROPERTY TAXES OR WATER BILLING. PROPERTY OWNERS MUST PROVIDE A WRITTEN NOTICE ADVISING THE CITY OF CORRECT NAME AND MAILING ADDRESS. SEND PROPERTY TAX MAILING ADDRESS TO: CITY OF YONKERS ASSESSMENT OFFICE CITY HALL - ROOM 100 40 SOUTH BROADWAY YONKERS, N.Y. 10701 SEND WATER BILLING MAILING ADDRESS TO: CITY OF YONKERS WATER BILLING OFFICE CITY HALL - ROOM 102 40 SOUTH BROADWAY YONKERS, N.Y. 10701 | |
| (Grantee's Att'y) _____ <small>Name Address City State Zip</small> | | |
| LOCATION OF PROPERTY TRANSFERRED | | |
| Address: _____ | | |
| City Tax Map _____ <small>Section Block Lot</small> | | |
| 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 a **notarized AFFIDAVIT OF EXEMPTION and SUPPORTING DOCUMENTATION** 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 | |
| 4. Add – Penalty and Interest | |
| 5. Total Tax, Penalty and Interest Due | |

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 Grantee)

Signature of Officer Administering Oath

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

SCHEDULE A

| Item No. | ALLOCATION OF CONSIDERATION WHERE THE PROPERTY TRANSFERRED IS SITUATED PARTLY WITHIN AND PARTLY WITHOUT THE CITY OF YONKERS |
|---|--|
| 6. | Consideration (Item 1, Page 1) |
| 7. | * Total Assessed Valuations of Property Situated Within and Without the City of Yonkers |
| 8. | Deduct – Assessed Valuations of Property Situated Outside the City of Yonkers |
| 9. | Assessed Valuation of Property Situated Within the City of Yonkers |
| 10. | Percentage of Total Assessed Valuations of Property Attributable to Property Situated Within the City of Yonkers (Item 9 ÷ Item 7) |
| 11. | Allocated Consideration Subject to Tax (Item 6 x Item 10) |
| | (enter as Item 2, Page 1 of Return) |
| <p>*NOTE: The assessed valuations to be used are those in effect at the time of transfer of property. In lieu of assessed valuations, the equalized valuations may be used provided that they are applied to the property both within and without the City of Yonkers.</p> | |

SCHEDULE B

Balance Sheet of Grantor Grantee as of _____
(Check Applicable Box)

NOTE: If the transfer is in liquidation of a corporation, the financial statement of the grantor is required as of the date nearest the date of transfer and before the liquidation.

If the transfer is to a corporation in exchange for its capital stock, the financial statement of the grantee is required as of the date immediately after the effective date of the transfer. The balance sheet data required by this schedule may be attached as a separate rider to the return in lieu of completion of this schedule or if more space is required.

| | |
|---|----|
| ASSETS (Itemize:) | \$ |
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| | |
| | |
| | |
| | |
| Total Assets | |
| LIABILITIES PLUS CAPITAL (Itemize:) | \$ |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Total Liabilities plus Capital | |

This completed return must be filed with the Comptroller of the City of Yonkers.

The tax due thereon must be paid within seven (7) days after delivery of the deed by the grantor to the grantee but before the recording of such deed. A return must be filed by both the grantor and the grantee whether or not a tax is due thereon and although the consideration for the deed is \$25,000 or less

IMPORTANT:

Penalty of 8% of the tax due for the first month of delay plus interest at the rate of 1% of such tax for each additional month of delay must be added if payment is not made on or before the due date.