



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 AND G.O. 3-1998

<i>Please Print</i>	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	
(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		
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 - 1.0% of Item 1 or 2 Whichever is Applicable		
4. Add - Penalty and Interest		
5. Total Tax, Penalty and Interest Due		

**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 and G.O. 3-1998.

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 and G.O. 3-1998.

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.)