INSTRUCTIONS(RP-5217-PDF-INS): www.orps.state.ny.us

FOR COUNTY USE ONLY

**Swis Code # 513600**
**Date Deed Recorded 02/02/2022**
**Bk # 7001 Pg # 233 Instr # 2022-2096**

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

1. **Property Location**: 7 (* STREET NUMBER) Grand Street (* STREET NAME)
Marlborough (* CITY OR TOWN) (VILLAGE) 12542 (* ZIP CODE)

2. **Buyer Name**: Noto (* LAST NAME/COMPANY) Kristopher J. (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** 1 # of Parcels OR ☐ Part of a Parcel

5. **Deed Property Size** (* FRONT FEET) X (* DEPTH) OR 1.30 (*ACRES)

6. **Seller Name**: Truncali (* LAST NAME/COMPANY) Joel (FIRST NAME)
(LAST NAME/COMPANY) (FIRST NAME)

**(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 ☐

*7. **Select the description which most accurately describes the use of the property at the time of sale:**
D. Non-Residential Vacant Land

**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** 12/21/2022
* 12. **Date of Sale/Transfer** 1/24/2022
*13. **Full Sale Price** 150,000.00

( 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)** 21
*17. **Total Assessed Value** 67,500
*18. **Property Class** 330
*19. **School District Name** Marlboro CSD
*20. **Tax Map Identifier(s)/Roll Identifier(s) (If more than four, attach sheet with additional identifier(s))**
108.12-4-1

## 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**
Joel Truncali 1/24/22
SELLER SIGNATURE DATE

**BUYER SIGNATURE**
BUYER SIGNATURE 1/24/22
DATE

**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.**)

Noto (* LAST NAME) Kristopher J. (FIRST NAME)
845 (*AREA CODE) 728-3945 (*TELEPHONE NUMBER (Ex. 9999999))
P.O. Box 7 (* STREET NUMBER) (* STREET NAME)
Marlboro (*CITY OR TOWN) NY (*STATE) 12542 (*ZIP CODE)

**BUYER'S ATTORNEY**

Anderson (LAST NAME) Michelle (FIRST NAME)
(845) (* AREA CODE) 562-3500 (TELEPHONE NUMBER (Ex. 9999999))