


**REAL ESTATE TRANSFER - DECLARATION OF VALUE**

Please read the filing instructions BEFORE completing this form. To enter information, use the "Tab" key to move to each field.

**PART I - TO BE COMPLETED BY BUYER, SELLER, OR AGENT**

(Please Type or Print Legibly)

SELLER  Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
 (or Federal I.D. No.) \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Number and Street or Rural Route City, Town or Post Office State Zip





BUYER Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
 (or Federal I.D. No.) \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Number and Street or Rural Route City, Town or Post Office State Zip

Address of Property Conveyed \_\_\_\_\_  
 \_\_\_\_\_  
 Number and Street or Rural Route City, Town or Post Office State Zip



Legal Description of Property \_\_\_\_\_  
 \_\_\_\_\_

If this is a sale of **AGRICULTURAL LAND** to one of the following persons or entities, please check (x) the appropriate box.  
 Corporation     Trust     Alien     Non-Resident Alien     Limited Partnership

**Declaration of Value Statement**

1. Total Amount Paid \_\_\_\_\_ \$ \_\_\_\_\_ **0.00**  
 2. Amount Paid for Personal Property (See Instructions) \_\_\_\_\_ \$ \_\_\_\_\_ **0.00**   
 3. Amount Paid for Real Property Only (1 minus 2) \_\_\_\_\_ \$ \_\_\_\_\_ **0.00**   
 4. Contract Sale Information - Please See Instructions  
 Down Payment \$ \_\_\_\_\_ Interest Rate \_\_\_\_\_ % Monthly Payment \_\_\_\_\_   
 Length of Contract \_\_\_\_\_ years Balloon Payment Date (if applicable) \_\_\_\_\_ 







**SALES CONDITIONS: Check (X) ALL of the following that apply to this sale**

<input type="checkbox"/> Sale Between Family Members (See Instructions)	<input type="checkbox"/> Corporate Merger or Reorganization	<input type="checkbox"/> Purchase of Adjoining Land
<input type="checkbox"/> Fulfillment of Prior Year Contract	<input type="checkbox"/> Exchange for Other Property ("Trade")	<input type="checkbox"/> Auction Sale
<input type="checkbox"/> Transfer of Partial Interest	<input type="checkbox"/> Sale to/by Exempt Organization	<input type="checkbox"/> Quit Claim Deed 
<input type="checkbox"/> Other (Explain) _____		<input type="checkbox"/> _____ 

I HEREBY DECLARE THAT THE INFORMATION CONTAINED IN PART 1 OF THIS FORM IS TRUE AND CORRECT.

Signature: \_\_\_\_\_ Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_  
 (Buyer OR Seller OR Agent)

**PART II - TO BE COMPLETED BY RECORDER**

Date of Instrument \_\_\_\_\_  Book (or instrument identification) \_\_\_\_\_  Page (or instrument identification) \_\_\_\_\_   
 Date of Recording \_\_\_\_\_ City or Township \_\_\_\_\_   
  Contract     Deed     \_\_\_\_\_ County \_\_\_\_\_   
 Real Estate Transfer Tax Paid \_\_\_\_\_

**PART III - TO BE COMPLETED BY ASSESSOR**

Classification of Property (1)  Urban (2)  Rural

<b>AGRICULTURAL REALTY</b> (1) <input type="checkbox"/> Improved Farm <input type="checkbox"/> Dwelling (2) <input type="checkbox"/> Unimproved Farm	<b>COMMERCIAL</b> (1) <input type="checkbox"/> Business    (3) <input type="checkbox"/> Apartment (2) <input type="checkbox"/> Office    (4) <input type="checkbox"/> Other _____	<b>RESIDENTIAL</b> (1) <input type="checkbox"/> Single-Family Dwlg. (2) <input type="checkbox"/> Two-Family Dwlg. Story Height _____ Age of Dwelling _____
<b>INDUSTRIAL</b> (1) <input type="checkbox"/> Lot & Bldgs.		

**SALES CONDITIONS**

Lot Assessed As Unplatted Land     Sale of Portion of Property ("Split")     Partial Assessment     Other (Explain Below)



A	B	C	D	E	F
---	---	---	---	---	---

(For Dept. of Revenue Use Only)

NOTE: ASSESSED VALUE MUST BE AS OF JANUARY 1, OF THE YEAR IN WHICH THE SALE OCCURRED

LAND \$ _____	BLDGS. \$ _____	TOTAL \$ _____	SALES RATIO _____ %
---------------	-----------------	----------------	---------------------

Assessor Comments \_\_\_\_\_

	N	O	P
--	---	---	---