



**ACRIS E-Form as required for all conveyances (including co-ops) within the Counties of Bronx, New York, Kings, Queens and Richmond.**

Please fill in ALL the data requested below and be sure all names as spelled correctly.

Name: \_\_\_\_\_ Title No. \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Property Information: Borough: \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Property Address: \_\_\_\_\_ Property Type \_\_\_\_\_ Property Class \_\_\_\_\_

Total Consideration \$ \_\_\_\_\_ Date of Conveyance \_\_\_\_\_

Contract Sale Date: \_\_\_\_\_ Condition of Transfer: \_\_\_\_\_  
(i.e.: fee interest, foreclosure, family transfer, etc.)

Assessed Value \$ \_\_\_\_\_ Lot Size \_\_\_\_\_ School Dist. \_\_\_\_\_

Will this be the primary residence for the purchaser(s): yes \_\_\_\_\_ no \_\_\_\_\_ don't know \_\_\_\_\_

Seller's Name(s)	Address	Social Security Number (s)
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Purchaser(s) Name(s)	Address	Social Security Number(s)
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If these E-Forms are being prepared as a courtesy, please indicate purchaser's attorney, address and who the assignee will be:

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