

ACRIS E-Forms & Westchester P.R.E.P

- 1.** Fill in the form below for all conveyances (including co-ops) located within the 5 Boroughs of New York and Westchester County.
- 2.** Please ensure that all names are spelled correctly.
- 3.** Submit at least **3** days prior to closing.
- 4.** A fee of **\$150** will be added to your title bill for the creation of these forms and will be payable at the time of closing. If you will **not** be responsible for the fee, please indicate who will be

Responsible Party: _____

From: _____

To: Judicial Title Recording Department

Fax #: _____

Email: ACRIS@judicialtitle.com **Fax:** 914-381-6785

E-Mail: _____

Title # or JR # (if app): _____

Property Address: _____

Borough: _____ **Section:** _____ **Block:** _____ **Lot:** _____

Property Type: _____ **Co-op Name:** _____

Total Consideration: _____ **Date of Conveyance:** _____

Contract of Sale Date: _____ **Condition of Transfer:** _____
Fee interest, foreclosure, family transfer, etc.

Assessed Value: _____ **Lot Size:** _____

School District: _____

Seller's Name(s)	Address(es) (after closing):	Social Security Numbers(s):
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Buyer's Name(s)	Address(es) (after closing):	Social Security Numbers(s):
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____