



SALES DISCLOSURE FORM

State Form 46021 (R14 / 1-23)

Prescribed by Department of Local Government Finance
Pursuant to IC 6-1.1-5.5

SDF ID

County Year Unique ID

PRIVACY NOTICE: The telephone numbers and Social Security numbers of the parties on this form are confidential according to IC 6-1.1-5.5-3. Do NOT place personally identifiable information (e.g. consulate numbers, passport numbers; government ID numbers, etc.) on this form as it may become publicly available.

NOTE: All questions must be answered to the best of the individual's ability. If the question does not apply, write "N/A" in the space provided. If the information requested is unknown, leave the space provided blank. Failure to provide a response for the italicized fields shall not result in the rejection of the underlying conveyance document by local officials.

INSTRUCTIONS: For additional information on how to complete this form, see the Sales Disclosure Form Instructions.

PART 1 – To be completed by BUYER/GRANTEE and SELLER/GRANTOR

A. PROPERTY TRANSFERRED – Must be conveyed on a single conveyance document (Additional contiguous properties can be listed on Page 5.)

Table with 4 columns: 1. Parcel Number or Tax Identification Number, Check all boxes applicable to parcel (2. Split, 3. Land, 4. Improvement), 5. Complete Address of Property, 6. Complete Tax Billing Address (if different from property address)

7. Legal Description of Parcel:

B. CONDITIONS – Check only those that apply.

Table with 2 main columns: YES NO CONDITION (listing conditions 1-6 and 8-10) and YES NO CONDITION (listing conditions 7, 8, 9, 10)

C. TRANSACTION DETAILS – Complete only those that apply.

Table with 2 main columns: YES NO CONDITION (listing conditions 1-4 and 5) and YES NO (listing conditions 6-10)

RESIDENTIAL OR AGRICULTURAL PROPERTY

D. SALES DATA – Complete only those that apply.		
<input type="checkbox"/> Information contained in question 3 is confidential and non-disclosable under IC § 5-14-3-4		
YES	NO	CONDITION
<input type="checkbox"/>	<input type="checkbox"/>	1. Changes to the property between Jan. 1 and sale date? Describe: _____
<input type="checkbox"/>	<input type="checkbox"/>	2. Property is a residential rental property.
		3. Planned use of the property? Describe: _____ _____
E. FINANCE DATA – Complete only those that apply.		
1. Sales Price: _____ 2. Personal Property included in transfer. Amount: _____ 3. Seller paid points/closing costs. Amount: _____ 4. Existence of family or business relationship between the buyer and the seller. Amount of discount (if any): \$ _____ 5. Describe any less-than-complete ownership interest and terms of seller financing. _____		YES NO CONDITION <input type="checkbox"/> <input type="checkbox"/> 6. Is the seller financing the sale? (If yes, answer questions 7-8) <input type="checkbox"/> <input type="checkbox"/> 7. Is buyer/borrower personally liable for loan? <input type="checkbox"/> <input type="checkbox"/> 8. Is this a mortgage loan? <input type="checkbox"/> <input type="checkbox"/> 9. Was an appraisal done?

COMMERCIAL OR INDUSTRIAL PROPERTY

F. SALES DATA – Complete only those that apply.		
<input type="checkbox"/> Information contained in question 3 is confidential and non-disclosable under IC § 5-14-3-4.		
YES	NO	CONDITION
<input type="checkbox"/>	<input type="checkbox"/>	1. Changes to the property between Jan. 1 and sale date? Describe: _____
<input type="checkbox"/>	<input type="checkbox"/>	2. Property is a residential rental property.
		3. Planned use of the property? Describe: _____ _____
G. FINANCE DATA – Complete only those that apply.		
<input type="checkbox"/> Information contained in questions 2-13 is confidential and non-disclosable under IC § 5-14-3-4 and IC § 6-1.1-35-9		
1. Sales price. Amount: _____ Check only those conditions that apply.		9. How was the sale financed? (Check any that apply.) <input type="checkbox"/> All Cash <input type="checkbox"/> Seller Financing <input type="checkbox"/> Construction Loan <input type="checkbox"/> Mortgage Loan <input type="checkbox"/> Sale Leaseback <input type="checkbox"/> Small Business Loan
YES	NO	CONDITION
<input type="checkbox"/>	<input type="checkbox"/>	2. Sale price included an existing business?
<input type="checkbox"/>	<input type="checkbox"/>	3. Sale price included a liquor license?
<input type="checkbox"/>	<input type="checkbox"/>	4. Transaction was part of a portfolio sale?
<input type="checkbox"/>	<input type="checkbox"/>	5. Any part of the property was leased at time of sale?
<input type="checkbox"/>	<input type="checkbox"/>	6. Sale included property receiving an abatement?
<input type="checkbox"/>	<input type="checkbox"/>	7. Appraisal was completed for the sale? Appraisal Value \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	8. Sale included property in a Tax Increment Finance (TIF) District?
		10. How was property marketed? <input type="checkbox"/> Word of mouth <input type="checkbox"/> List with broker <input type="checkbox"/> For sale sign <input type="checkbox"/> Buyer approached
		11. Special Circumstances? (Check any that apply.) <input type="checkbox"/> Sale between same business entity <input type="checkbox"/> Sale in lieu of foreclosure <input type="checkbox"/> Sold at auction <input type="checkbox"/> Trade of equipment or services <input type="checkbox"/> Sale of partial interest
		12. Value of personal property included: \$ _____
		13. Value of intangible personal property included: \$ _____

RELIGIOUS USE PROPERTY TAX EXEMPTION

Is the property being transferred going to continue to be used by a church or religious society for the same property tax exempt purposes provided by IC 6-1.1-10-21(e)?	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>

H. PREPARER			
Preparer of the Sales Disclosure Form		Title	
Company		Email Address	Telephone Number ()
Address (number and street, city, state, country, and ZIP Code)			
I. SELLER(S)/GRANTOR(S)			
Seller 1 – Name as it appears on conveyance document		Seller 2 – Name as appears on conveyance document	
Address (number and street)		Address (number and street)	
City, State, and ZIP Code		City, State, and ZIP Code	
Country		Country	
Email Address	Telephone Number ()	Email Address	Telephone Number ()
Under penalties of perjury, I hereby certify this Sales Disclosure, to the best of my knowledge and belief, is true, correct, and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5. A person who knowingly and intentionally falsifies the value of transferred real property, or omits or falsifies any information required to be provided, commits a Level 5 felony.			
Signature of Seller		Signature of Seller	
Printed Name of Seller	Date Signed (mm/dd/yyyy)	Printed Name of Seller	Date Signed (mm/dd/yyyy)
J. BUYER(S)/GRANTEE(S) – APPLICATION FOR PROPERTY TAX DEDUCTIONS – IDENTIFY ALL THAT APPLY			
Buyer 1 – Name as it appears on conveyance document		Buyer 2 – Name as it appears on conveyance document	
Address (number and street)		Address (number and street)	
City, State, and ZIP Code		City, State, and ZIP Code	
Country		Country	
Email Address	Telephone Number ()	Email Address	Telephone Number ()
Pursuant to IC 6-1.1-12-44, the Sales Disclosure Form may be used to apply for certain deductions. Identify all of those that apply:			
YES	NO	CONDITION	YES NO CONDITION
<input type="checkbox"/>	<input type="checkbox"/>	1. Will this property be the buyer's primary residence?	<input type="checkbox"/> <input type="checkbox"/> 3. Homestead
<input type="checkbox"/>	<input type="checkbox"/>	2. Does the buyer have a homestead to be vacated for this residence? If yes, provide address:	<input type="checkbox"/> <input type="checkbox"/> 4. Solar Energy Heating or Cooling System
Address (number and street)		<input type="checkbox"/> <input type="checkbox"/> 5. Wind Power Device	
City, State, and ZIP Code		<input type="checkbox"/> <input type="checkbox"/> 6. Hydroelectric Power Device	
County		<input type="checkbox"/> <input type="checkbox"/> 7. Geothermal Energy Heating or Cooling Device	
Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct, and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5. A person who knowingly and intentionally falsifies the value of transferred real property, or omits or falsifies any information required to be provided, commits a Level 5 felony. (Note: Both spouse's information, SSN/Driver's License/ID/Other Number is necessary only if a Homestead Deduction is being filed.)			
Signature of Buyer 1		Signature of Buyer 2/Spouse	
Printed Legal Name of Buyer 1	Sign Date (MM/DD/YY)	Printed Legal Name of Buyer 2/Spouse	Sign Date (MM/DD/YY)
Last 5 Digits of Buyer 1 SSN/Driver's License/ID/Other Number		Last 5 Digits of Buyer 2/Spouse SSN/Driver's License/ID/Other Number	

PART 2 – COUNTY ASSESSOR

The county assessor must verify and complete items 1 through 14 and stamp the sales disclosure form before sending it to the auditor:

	1. Property (Parcel Number)	2. AV of Land	3. AV of Improvement	4. Value of Depreciable Personal Property															
A.)																			
	5. AV Total	6. Property Class Code	7. Neighborhood Code	8. Tax District															
A.)																			
Assessor Stamp		10. Identify physical changes to property between the assessment date and the date of sale: _____ _____ _____ _____ _____		<table border="0"> <tr> <td>YES</td> <td>NO</td> <td>CONDITION</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>11. Is form completed?</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>12. State sales disclosure fee required?</td> </tr> <tr> <td colspan="3">13. Date of Sale (mm/dd/yyyy): _____</td> </tr> <tr> <td colspan="3">14. Date Form Received (mm/dd/yyyy): _____</td> </tr> </table>	YES	NO	CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	11. Is form completed?	<input type="checkbox"/>	<input type="checkbox"/>	12. State sales disclosure fee required?	13. Date of Sale (mm/dd/yyyy): _____			14. Date Form Received (mm/dd/yyyy): _____		
YES	NO	CONDITION																	
<input type="checkbox"/>	<input type="checkbox"/>	11. Is form completed?																	
<input type="checkbox"/>	<input type="checkbox"/>	12. State sales disclosure fee required?																	
13. Date of Sale (mm/dd/yyyy): _____																			
14. Date Form Received (mm/dd/yyyy): _____																			

Items 15 through 18 are to be completed by the assessor when validating this sale:

15. If applicable, identify any additional special circumstances relating to validation of sale: _____ _____ _____ _____	<table border="0"> <tr> <td>YES</td> <td>NO</td> <td>CONDITION</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>16. Sale valid for trending?</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>17. Validation of sale complete?</td> </tr> <tr> <td colspan="3">18. Validated by: _____</td> </tr> </table>	YES	NO	CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	16. Sale valid for trending?	<input type="checkbox"/>	<input type="checkbox"/>	17. Validation of sale complete?	18. Validated by: _____		
YES	NO	CONDITION											
<input type="checkbox"/>	<input type="checkbox"/>	16. Sale valid for trending?											
<input type="checkbox"/>	<input type="checkbox"/>	17. Validation of sale complete?											
18. Validated by: _____													

PART 3 – COUNTY AUDITOR

Auditor Stamp	1. State Sales Disclosure Fee Amount Collected: \$ _____ 2. Other Local Fee: \$ _____ 3. Total Fee Collected: \$ _____ 4. Auditor Receipt Book Number: _____ 5. Date of Transfer (mm/dd/yyyy): _____	<table border="0"> <tr> <td>YES</td> <td>NO</td> <td>CONDITION</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>6. Is form completed?</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>7. Is state sales disclosure fee collected?</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>8. Attachments complete?</td> </tr> </table>	YES	NO	CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	6. Is form completed?	<input type="checkbox"/>	<input type="checkbox"/>	7. Is state sales disclosure fee collected?	<input type="checkbox"/>	<input type="checkbox"/>	8. Attachments complete?
YES	NO	CONDITION												
<input type="checkbox"/>	<input type="checkbox"/>	6. Is form completed?												
<input type="checkbox"/>	<input type="checkbox"/>	7. Is state sales disclosure fee collected?												
<input type="checkbox"/>	<input type="checkbox"/>	8. Attachments complete?												

PART 4 – RECEIPT FOR STATEMENT OF DEDUCTION OF ASSESSED VALUATION

SDF ID	SDF Date (mm/dd/yyyy)	Buyer 1 – Name as appears on conveyance document	
Parcel Number		Address of Property (number and street)	
Check those deductions for which the individual has applied: <input type="checkbox"/> Homestead <input type="checkbox"/> Solar Energy <input type="checkbox"/> Wind Power <input type="checkbox"/> Hydroelectric <input type="checkbox"/> Geothermal		City, State, and ZIP Code of Property	
		Auditor Signature	Date (mm/dd/yyyy)

A person who knowingly and intentionally falsifies value of transferred real property, or omits or falsifies any information required to be provided in the sales disclosure form, commits a Level 5 felony.



SALES DISCLOSURE PART 1(A)

State Form 55632 (R / 1-21)

SDF ID		

County Year Unique ID

PRIVACY NOTICE: The telephone numbers and Social Security numbers of the parties on this form are confidential according to IC 6-1.1-5.5-3. Do NOT place personally identifiable information (e.g. consulate numbers, passport numbers; government ID numbers, etc.) on this form as it may become publicly available.

PART 1 – To be completed by BUYER/GRANTEE and SELLER/GRANTOR
A. PROPERTY TRANSFERRED – Must be conveyed on a single conveyance document.
 (Multiple parcels can be listed on this form and attached to State Form 46021 only if they are contiguous and located entirely within a single taxing district.)

1. Parcel Number or Tax Identification Number	Check all boxes applicable to parcel.	5. Complete Address of Property	6. Complete Tax Billing Address (if different from property address)
B.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement		
7. Legal Description of Parcel B:			
C.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement		
7. Legal Description of Parcel C:			
D.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement		
7. Legal Description of Parcel D:			
E.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement		
7. Legal Description of Parcel E:			
F.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement		
7. Legal Description of Parcel F:			
G.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement		
7. Legal Description of Parcel G:			
H.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement		
7. Legal Description of Parcel H:			