

## ACRIS/PREP E-TAX FORM INFORMATION SHEET

*Form needs to be completed and emailed to Carol Branca at [cbranca@skylinetrg.com](mailto:cbranca@skylinetrg.com).  
Please provide e-mail address, ACRIS forms once completed CANNOT be faxed.*

To: \_\_\_\_\_ Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone No.: \_\_\_\_\_

CO-OP TRANSFER: \_\_\_\_\_

INSURED TITLE: \_\_\_\_\_

CO-OP Corporation Name: \_\_\_\_\_

Title Number: \_\_\_\_\_

Date of Transfer: \_\_\_\_\_ Contract Date: \_\_\_\_\_

Purchase Price: \$ \_\_\_\_\_

Seller: \_\_\_\_\_ SS No.: \_\_\_\_\_

Seller: \_\_\_\_\_ SS No.: \_\_\_\_\_

Address: \_\_\_\_\_

Purchaser: \_\_\_\_\_ SS No.: \_\_\_\_\_

Purchaser: \_\_\_\_\_ SS No.: \_\_\_\_\_

Address: \_\_\_\_\_

Property Address: \_\_\_\_\_

County: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Unit No. (if applies) \_\_\_\_\_

Property Type: \_\_\_\_\_

Purchasers Attorney: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Sellers Attorney (Incl. Phone No.): \_\_\_\_\_

Phone No.: \_\_\_\_\_

- **Please provide first page of the contract of sale.**
- If this is an Insured title where a closing date has been set, the e-tax forms will accompany the closer's package to the closing.
- If this is an uninsured CO-OP transfer only, the e-tax forms will be sent via mail to you to be signed and can be returned to this office for filing, for an additional fee.
- Please note that the cost for completing E-Tax Forms is \$150.00.