

VT Form
PTT-172 VERMONT
PROPERTY TRANSFER TAX RETURN

For Town Use Only
7002

A. TRANSFEROR'S (Seller's) INFORMATION

| | | | | |
|---|--|--|---|------------------------|
| Entity TRANSFEROR Name | | | Web request key / Confirmation code 9cynwp | |
| OR Individual TRANSFEROR Last Name LETOURNEAU | | | First Name WENDY | Initial |
| TRANSFEROR Mailing Address Following Transfer 184 B LEDGEWOOD LANE | | | Federal ID Number | |
| Line 2 for Mailing Address Following Transfer (if needed) | | | OR Social Security Number XXX-XX-XXXX | |
| City MILTON | | | State VT | ZIP Code 05468-0000 |
| Foreign Country (if not United States) | | | Daytime Telephone Number NOT AVAILABLE | |
| Email Address NOT AVAILABLE | | | Total Number of Transferors 1 | |
| For Department Use Only | | | | |

B. TRANSFEREE'S (Buyer's) INFORMATION

| | | | | |
|--|--|--|---|------------------------|
| Entity TRANSFEREE Name | | | Federal ID Number | |
| OR Individual TRANSFEREE Last Name BARRY | | | First Name CHRISTOPHER | Initial J |
| TRANSFEREE Mailing Address Following Transfer 8 LOCKE TERRACE | | | OR Social Security Number XXX-XX-XXXX | |
| Line 2 for Mailing Address Following Transfer (if needed) | | | Daytime Telephone Number NOT AVAILABLE | |
| City ST. ALBANS CITY | | | State VT | ZIP Code 05478-0000 |
| Foreign Country (if not United States) | | | Total Number of Transferees 2 | |
| Email Address NOT AVAILABLE | | | For Department Use Only | |

C. PROPERTY INFORMATION

| | | |
|--|---|------------------------------|
| Property Physical Location - Number and Street or Road Name 8 LOCKE TERRACE | | Land Size (in acres) 0.10 |
| City or Town St. Albans City | Check if property is located in multiple cities or towns <input type="checkbox"/> | SPAN 549-173-01011 |

D. HOLDING PERIOD

| | | |
|---|--|-------------------------------|
| Date Acquired by Transferor (mm dd yyyy) Jun-05-2017 | Date of this Closing (mm dd yyyy) Jul-31-2020 | Time Held 3 Years 1 Months |
|---|--|-------------------------------|

E. EXEMPTIONS

- E1. If transfer is exempt from Property Transfer Tax, enter exemption number (see quick reference guide) . E1. 00
- E2. If sale was between family members, enter corresponding number (see quick reference guide). E2. _____
- E2a. If Line E2 is "05," enter description. E2a. _____
- E3. Land Gains exemption number (see quick reference guide). E3. 13

(continued on next page)

Transferee's Name CHRISTOPHER J. BARRY
Property Location 8 LOCKE TERRACE
Date of this Closing Jul-31-2020

NOTE: Long names or addresses may not display fully on the paper copy of the return, but the full names and addresses are submitted electronically to the Town and Department.

F. TRANSFER INFORMATION

- F1. How did the Transferor acquire this property? (see quick reference guide) F1. 01
F1a. If Line F1 is "04," enter description. F1a. _____
- F2. Interest conveyed in this transfer (see quick reference guide) F2. 01
F2a. If Line F2 is "07," enter percent of interest here F2a. 0.00 %
F2b. If Line F2 is "08," enter description. F2b. _____
- F3. Type of building construction at time of transfer (see quick reference guide) F3. 02
F3a. If Line F3 is "05," enter number of units transferred. F3a. 0
F3b. If Line F3 is "06," enter number of dwelling units transferred F3b. 0
F3c. If Line F3 is "20," enter description. F3c. _____
- F4. Was the transferee a tenant prior to this transfer? F4. Yes No
- F5. Financing F5. Conventional/Bank Owner Financing Other
F5c. If Line F5 is "Other," enter description F5c. _____
- F6. Do you intend to record this return with the Town/City within 60 days of the closing? .. F6. Yes No

G. AGRICULTURAL / MANAGED FOREST LAND USE VALUE PROGRAM, 32 V.S.A. CHAPTER 124

- G1. Is the property being transferred enrolled in the Current Use (Use Value Appraisal) Program? G1. Yes No
- G2. To continue enrollment in the Current Use Program, the new owner must submit a Current Use Application within 30 days of the recording date. Will the new owner be submitting that application? G2. Yes No

H. TRANSFER INFORMATION

- H1. Transferor's use of property BEFORE transfer (see quick reference guide) H1. 01
H1a. If Line H1 is "07," "08," or "09," enter description. ... H1a. _____
- H2. Transferee's use of property AFTER transfer (see quick reference guide) H2. 01
H2a. If Line H2 is "07," "08," or "09," enter description. ... H2a. _____
- H3. Was the property rented BEFORE transfer? H3. Yes No
- H4. Will the property be rented AFTER transfer? H4. Yes No
- H5. Have development rights previously been conveyed? H5. Yes No
- H6. Does the transferee hold title to any adjoining property? H6. Yes No

(continued on next page)

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Form PTT-172
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Rev. 10/16

Transferee's Name CHRISTOPHER J. BARRY
 Property Location 8 LOCKE TERRACE
 Date of this Closing Jul-31-2020

NOTE: Long names or addresses may not display fully on the paper copy of the return, but the full names and addresses are submitted electronically to the Town and Department.

I. REAL ESTATE WITHHOLDING CERTIFICATION

- I1.** The transferee certifies that 2.5% VT Income tax has been withheld from the purchase price and will be remitted to the Vermont Commissioner of Taxes with Form REW-171 within 30 days of the date of this closing. **I1.** Yes No
- I2.** If Line I1 is "No," enter the withholding exemption number (see quick reference guide). **I2.** 01
- I2a.** If Line I2 is "04," enter Commissioner's Certificate number. **I2a.** _____

J. TAX CALCULATION

Tax on Special Rate Property

- J1.** Amount of value eligible for special principal residence rate (see instructions) **J1.** 100,000.00
- J2.** If transfer happened prior to July 1, 2011, enter the amount of value eligible for a special rate. (see instructions) **J2.** 0.00
- J3.** Total amount of value eligible for special rate (Add Lines J1 & J2) **J3.** 100,000.00
- J4.** Tax due on amount of value eligible for special rate (Multiply Line J3 by the tax rate of 0.005) **J4.** 500.00
- J5.** Only If Line E1 is "99": Enter any amount of value in excess of \$110,000 but below \$200,000. **J5.** 0.00
- J6.** Tax due on amount of value eligible for exemption 99 special rate (Multiply Line J5 by the tax rate of 0.0125 for exemption 99 only) **J6.** 0.00
- J7.** Total due on amount of value eligible for special rates. (Add Lines J4 and J6) **J7.** 500.00

Tax on General Rate Property

- J8.** Value paid or transferred as defined in 32 V.S.A. § 9601(6) **J8.** 215,000.00
- J9.** Value paid or transferred for personal property **J9.** 0.00
- J10.** Value paid or transferred for real property (Subtract Line J9 from Line J8) **J10.** 215,000.00
- J11.** Enter amount from Line J3 above **J11.** 100,000.00
- J12.** Enter amount from Line J5 above **J12.** 0.00
- J13.** Subtract Lines J11 and J12 from Line J10. **J13.** 115,000.00
- J14.** Tax due on amount of value subject to the General Rate (Multiply Line J13 by the tax rate of 0.0145 which includes a 0.002 surcharge for the Clean Water Fund, 32 V.S.A. § 9602a) **J14.** 1,667.50

Total Tax Due

- J15.** Total Tax Due (Add Lines J7 and J14) **J15.** 2,167.50

(continued on next page)

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Transferee's Name CHRISTOPHER J. BARRY
 Property Location 8 LOCKE TERRACE
 Date of this Closing Jul-31-2020

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LOCAL AND STATE PERMITS AND ACT 250 NOTICE

This serves as notice that:

- The property being transferred may be subject to regulations governing **potable water supplies and wastewater systems** under 10 V.S.A. chapter 64 and **building, zoning and subdivision** regulations;
- The property being transferred may be subject to Act 250 regulations regarding land use and development under 10 V.S.A. chapter 151;
- The parties have an obligation to investigate and disclose knowledge regarding **flood regulations** affecting the property.

To determine if the property is in compliance with or exempt from these rules, contact the relevant agency. Contact information is provided in the instructions.

Transferor and Transferee state that the information submitted on this return is true, correct and complete to the best of their knowledge.

| | |
|---|---|
| Prepared by (print or type) <u>TIMOTHY G. HURLBU</u> | Preparer's Email Address <u>SUEZIE@VTLAW.US</u> |
| Preparer's Address <u>375 LAKE ROAD</u> <u>ST. ALBANS, VT 05478-0000</u> | Preparer's Telephone <u>(802) 527-7200</u> |

Town or City: Please forward original to the Vermont Department of Taxes within 30 days of receipt.

This section to be completed by Town or City Clerk

| | | |
|--|-------------------------------------|---------------------------------|
| Book Number <u>289</u> | Page Number <u>166</u> | Grand List year <u>2020</u> |
| City or Town <u>St. Albans City</u> | Parcel ID Number <u>26053008</u> | Date of Record <u>8/3/20</u> |
| Grand List Value <u>136600.00</u> | Grand List Category* <u>01</u> | SPAN <u>549-173-01011</u> |
| Comments, additional information, etc. | | |

Duplicate Return Suspected

Original Return Waiting on Deed

ACKNOWLEDGMENT

Return received.

SIGNED



, Clerk

DATE

8/3/20

* Please use the following numeric two-digit grand list category codes

| | | |
|----------------------------------|-------------------------------|-----------------------------|
| Residential <6 Acres01 | Seasonal >6 Acres06 | Utilities Other11 |
| Residential >6 Acres02 | Commercial07 | Farm12 |
| Mobile Home/Un03 | Commercial Apt08 | Other13 |
| Mobile Home/La.04 | Industrial09 | Woodland14 |
| Seasonal <6 Acres05 | Utilities Elec10 | Miscellaneous15 |

For Town Use Only

| | |
|--------------------------------|---|
| VT Schedule PTT-175 | ADDITIONAL TRANSFERORS AND TRANSFEREES |
|--------------------------------|---|

BLACK OUT ALL ID
NUMBERS BELOW ON
TOWN COPY ONLY

Attach to Form PTT-172

| | |
|--|-------------------------------------|
| Transferee (Buyer) from PTT-172 CHRISTOPHER J. BARRY | |
| Property Location (Physical Street Address) 8 LOCKE TERRACE | Date of this Closing Jul-31-2020 |

Transferor (Seller) OR Transferee (Buyer) # - Check ONE

| | | | | | |
|---|---|--------------------------------|-------------------|--------------------------------|---|
| Entity Transferee / Transferor Name | | | Federal ID Number | | |
| OR | Individual Transferee / Transferor Last Name BARRY | First Name SAMANTHA | Initial M | OR | Social Security Number XXX-XX-XXXX |
| | Transferee / Transferor Mailing Address Following Transfer 8 LOCKE TERRACE | | | | Daytime Telephone Number NOT AVAILABLE |
| Line 2 for Mailing Address Following Transfer (if needed) | | | | For Department Use Only | |
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