

# CITY OF HARVEY



## TRANSFER STAMP REQUIREMENTS

(Revised August 2019)

## TRANSFER STAMP REQUIREMENTS CHECKLIST

**STEP 1:** Pay for and schedule **POINT-OF-SALE INSPECTION REPORT** (Issued by Planning Dept.) *Note: Required for all properties changing ownership.*

**STEP 2:** Request a **WATER VERIFICATION FORM** (Issued by Water Dept) – **Note:** Seller must obtain a Water Verification Form prior to transfer of property, which will only be issued after a final water bill reading has been completed **and** all outstanding balances have been paid. **Request document at least 72 hours prior to closing as there may be a 48-hour waiting period on final readings. Note: Good for 30days after reading.**

**STEP 3:** Bring the following documents to the Planning Department, fully completed and notarized, if applicable. **ALL SIGNATURES ON FORMS MUST BE ORIGINAL!**

- REAL ESTATE TRANSFER DECLARATION FORM** (attached)
- DEED**  
*Copy of the deed to be executed at closing with the Buyer's name listed or a copy of an Illinois Transfer Declaration.*
- REAL ESTATE CONTRACT**  
*Copy of contract showing Buyer's name and signature/initials and final sales price.*
- AS-IS AFFIDAVIT** (attached with inspection report)  
*This document must be signed by the buyer and notarized.*
- BUYER'S VERIFICATION FORM.** (attached)  
*This document must be signed by the buyer and notarized.*
- CLEARANCE FORM** (attached)  
*Bottom portion of this form is completed by Planning Dept. and lists outstanding housing fines that must be paid prior to issuance of Transfer Stamp.*

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### COST OF TRANSFER STAMP

A Transfer Stamp costs **\$5.00 per \$1,000.00** of the taxable consideration. This cost is split between the Buyer (\$2.50 per \$1,000.00) and Seller (\$2.50 per \$1,000.00). The Buyer is also responsible for paying a **\$60.00 administrative fee**. The Transfer Stamp can also be purchased in full (\$5.00 per \$1,000.00) by the Buyer or Seller.

**Note:** The party that comes in to purchase the Transfer Stamp must have all of the required documentation listed above **and** must pay for the total cost of the Transfer Stamp **plus**. **This is a one time transaction.** One party cannot come in and pay one half of the Transfer Stamp fees and the other party pays the balance at a later date. **All fees must be paid at the same time...no exceptions!**

## **PAYMENT OPTIONS**

Cash, cashier checks, and credit cards as are accepted forms of payment for Inspections, Permits and Transfer Stamps. **Note:** *A valid driver's license or State of Illinois I.D. must be presented for checks. A working home phone number must also be provided. No Cell Phone Numbers Accepted.*

### **INSPECTION AND BUILDING PERMIT INFORMATION AND INSTRUCTIONS**

- A. Prior to purchasing Transfer Stamps, the Seller **must** order a Point of Sale Inspection. A completed Point of Sale Inspection application **cannot be mailed or faxed – it must be filled out in person.** Point of Sale Inspection fees are as follows:
- \$ 150.00 for one to two units
  - \$ 25.00 for each additional unit
  - \$300.00 for all commercial property

**Note:** *A Point-of-Sale Inspection report may take up to **five (5) business days** from the date of inspection to be completed. Once a Point-of-Sale Inspection is completed, the Seller must make sure the Buyer receives a copy of the inspection report.*

- B. The Buyer **must** submit a notarized As-Is Affidavit and a notarized Buyer's Verification (both attached) to certify Buyer's information and knowledge of violations and intent to make any repairs. After the closing sales transaction, the buyer must bring in closing documents including a signed and notarized recorded judicial sales deed. Permits may be applied for, if applicable, at this time. All contractors must be registered with the City of Harvey as such. No Certificate of Occupancy will be issued until all violations have been remedied according to the building ordinances and codes adopted and mandated by the City of Harvey.

**CITY OF HARVEY**  
15320 BROADWAY AVENUE  
HARVEY, IL 60426

<b>Stamp No.</b>	_____
<b>Date Issued</b>	_____
<b>Water Balance</b>	_____
<b>Staff Initials</b>	_____

**REAL ESTATE TRANSFER DECLARATION**

The cost of the transfer stamp is as follows:

- **Buyer's Expense** - **\$2.50 per \$1,000.00 or part thereof plus \$60.00** \$ \_\_\_\_\_  
**administrative processing fee**
  
- **Seller's expense** - **\$2.50 per \$1,000.00 or part thereof** \$ \_\_\_\_\_

*Note:* Transfer stamps should be picked up 48 hours in advance.



**Address of Property** \_\_\_\_\_  
Harvey, IL 60426 (Thornton Township) (If property is vacant, please attach legal description)

**Type of Deed** \_\_\_\_\_ **Date of Deed** \_\_\_\_\_

Full Actual Consideration (Purchase Price)	\$ _____
Less Amount of Personal Property Included in Purchase	\$ _____
Net Consideration for Real Estate	\$ _____
Net Taxable Consideration to be Covered by Stamps	\$ _____
Amount of Stamps (\$5.00 per \$1,000 or part thereof of taxable consideration)	\$ _____

**CITY OF HARVEY**  
15320 BROADWAY AVENUE  
HARVEY, IL 60426

**We hereby declare the full actual consideration and above facts contained in this declaration to be true and correct.**

**Grantor/Seller or Agent:** *(Please Print Clearly)*

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

Address/City/State/Zip: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Grantee/Buyer or Agent:** *(Please Print Clearly)*

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

Address/City/State/Zip: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



**AFFIDAVIT**

I/We hereby certify that \_\_\_\_\_ is/are purchaser(s) of property located at \_\_\_\_\_, Harvey, IL, and that I/We are aware of all violations that have been cited by the City of Harvey against said property as a result of a Point of Sale Inspection made on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, which violations are hereby incorporated by reference.

**PLEASE CHECK ONE BOX BELOW:**

**I hereby accept full responsibility for correcting said violations** within a period not to exceed one year of my obtaining an interest in said property. I further certify that I have the power and authority to bind any and all other persons or parties who obtain an interest in said property as a result of title, which is subject of this transaction.

**I accept no responsibility for correcting said violations on the property.** I hold the seller fully responsible for correcting all violations and will not finalize the process to transfer property until said violations are corrected by seller. (NOTE: TRANSFER STAMPS WILL NOT BE ISSUED FOR THE SALE OF PROPERTY UNTIL VIOLATIONS ARE CORRECTED BY SELLER UNLESS PROPERTY IS SOLD AS/ IS. SOME EXCEPTIONS MAY APPLY.)

\_\_\_\_\_  
Signature of Buyer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-Buyer

\_\_\_\_\_  
Date

Subscribed to and sworn before me a NOTARY PUBLIC this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**BUYER'S VERIFICATION and INFORMATION FORM**

**SELLER(S) NAME:** \_\_\_\_\_

**SELLER(S) ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**BUYER(S) NAME:** \_\_\_\_\_

**BUYER(S) ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**PHONE:** \_\_\_\_\_ **WK:** \_\_\_\_\_

<p><b>PROPERTY ADDRESS:</b></p> <p>_____</p> <p>HARVEY, IL 60426</p>
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**WILL PROPERTY BE OWNER OCCUPIED?**     YES                       NO

**TYPE OF PROPERTY:**     SINGLE-FAMILY                       RENTAL \_\_\_\_\_ (*#of units*)  
 COMMERCIAL/INDUSTRIAL (*circle type*)

I hereby certify that the above statements are true and correct.

**BUYER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**CO-BUYER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Subscribed to and sworn before me a NOTARY PUBLIC this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**CLEARANCE FORM**

DATE: \_\_\_\_\_

SELLER(S) NAME: \_\_\_\_\_

BUYER(S) NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

P.I.N. #: \_\_\_\_\_

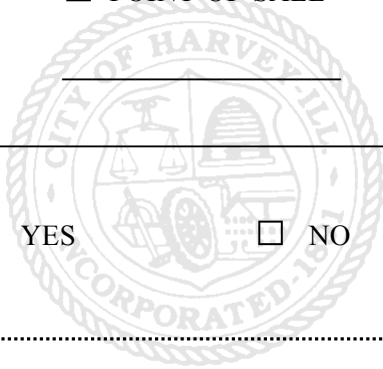
For office use only

TYPE OF INSPECTION:       POINT-OF-SALE       RENTAL

DATE OF INSPECTION: \_\_\_\_\_ COST \$ \_\_\_\_\_

INSPECTOR'S NAME: \_\_\_\_\_

PROPERTY SOLD AS-IS:     YES     NO



HOUSING FINES/LIENS ON PROPERTY:      YES / NO    *(please circle)*

Ticket No./Lien No.	Ticket/Lien Date	Amount

Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Staff Initials: \_\_\_\_\_