

PECONIC BAY REGION  
 COMMUNITY PRESERVATION FUND  
 TOWN OF SHELTER ISLAND  
 APPLICATION  
 FIRST-TIME HOMEBUYER'S EXEMPTION

Please print or type.

**Schedule A Information Relating to Conveyance**

Grantor <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other	Name (individual: last, first, middle initial)	Social Security Number 
	Mailing Address	Social Security Number 
	City                                  State                                  ZIP code	Federal Employer ID Number 
Grantee <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other	Name (individual: last, first, middle initial)	Social Security Number 
	Mailing Address	Social Security Number 
	City                                  State                                  ZIP code	Federal Employer ID Number 

Location and description of property conveyed

Tax map designation				Address	Village	Town
Dist	Section	Block	Lot			

Date of conveyance

month	day	year

Dual Towns:

\_\_\_\_\_

\_\_\_\_\_

**Schedule B. Income and Purchase Price**

1. Income ..... \_\_\_\_\_  
 (Attached most recent federal or state income tax return within two years of the conveyance)

2. Purchase Price ..... \_\_\_\_\_  
 (Attach Contract or other instrument of sale)

Signature (the grantee must sign):

The undersigned applicant(s)/Grantee(s) hereby certifies/certify that the property which is the subject of this application will be the primary residence of the applicant(s), and that the applicant(s) is/are a "first-time homebuyer(s)" as defined by Section 1449-aa (18) of the New York State Tax Law. A first time homebuyer is a person who has not owned a residential property, including a manufactured home, town house or condominium at any time during the three year period immediately prior to the date of conveyance and does not own a vacation or investment home as of such date. This application, including any certification, schedule, or attachment is to the best of his/her knowledge, true and complete.

Grantee: \_\_\_\_\_

Grantee: \_\_\_\_\_

Approved: \_\_\_\_\_  
 Attorney, Town of Shelter Island

**ACKNOWLEDGMENT**

State of New York )  
 County of Suffolk ) ss.

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned, a notary public in and for said state, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that (s)he executed the same in his capacity, and that by his/her signature on the instrument, the individual, or the persons on behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
 Notary Public