



SALES DISCLOSURE FORM

State Form 46021 (R10/10-09)

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

SDF ID

C79-2016-1825965

County Year Unique ID
SDF Date: 10/26/2016

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(d).

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

A. PROPERTY TRANSFERRED - MUST BE CONVEYED ON A SINGLE CONVEYANCE DOCUMENT

1. Property Number	Check box if applicable to parcel	5. Complete Address of Property	6. Complete Tax Billing Address (if different from property address)
A.) 791209131003000013	<input type="checkbox"/> 2. Split <input checked="" type="checkbox"/> 3. Land <input checked="" type="checkbox"/> 4. Improvement	7400 WESLEYAN DR DAYTON 47941	PO BOX 221 DAYTON IN 47941
7. Legal Description of Parcel A: NW 1/4 9 -22 -3			
B.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement	See Supplemental Sheets for Multi-Parcel Sales	
7. Legal Description of Parcel B:			

B. CONDITIONS - IDENTIFY ALL THAT APPLY

- If condition 1 applies, filer is subject to disclosure and a disclosure filing fee.
- CONDITION**
- 1. A transfer of real property interest for valuable consideration.
 - 2. Buyer is an adjacent property owner.
 - 3. Vacant land.
 - 4. Exchange for other real property ("Trade").
 - 5. Seller paid points. (Provide the value Table C Item 12.)
 - 6. Change planned in the primary use of the property? (Describe in special circumstances in Table C Item 3.)
 - 7. Existence of family or business relationship between buyer and seller. (Complete Table C Item 4.)
 - 8. Land contract. Contract term (YY): 0 and contract date (MM/DD/YYYY): _____
 - 9. Personal property included in transfer. (Provide the value Table C Item 5.)
 - 10. Physical changes to property between March 1 and date of sale. (Describe in special circumstances in Table C Item 3.)
 - 11. Partial interest. (Describe in special circumstances in Table C Item 3.)
 - 12. Easements or right-of-way grants.

C. SALES DATA - DISCLOSE VALUE OF ITEMS LISTED IN TABLE B, ITEMS 1-15

1. Conveyance date (MM/DD/YYYY):	<u>8/18/2016</u>
2. Total number of parcels:	<u>1</u>
3. Describe any unusual or special circumstances related to this sale, including the specification of any less-than-complete ownership interest and terms of seller financing.	
YES NO CONDITION	
	4. Family or business relationship existing between buyer and seller? Amount of discount: \$ <u>0.00</u>
Disclose actual value in money, property, a service, an agreement, or other consideration.	
5. Estimated value of personal property:	\$ <u>0.00</u>
6. Sales price:	\$ <u>412,996.28</u>
YES NO CONDITION	
7. Is the seller financing sale? If yes, answer questions (8-13).	
8. Is buyer/borrower personally liable for loan?	
9. Is this a mortgage loan?	
10. Amount of loan:	\$ <u>0.00</u>
11. Interest rate:	<u>0.00</u> %
12. Amount in points:	\$ <u>0.00</u>
13. Amortization period:	<u>0.00</u>

If conditions 13-15 apply, filers are subject to disclosure, but no disclosure filing fee.

- YES NO CONDITION**
- 13. Document for compulsory transactions as a result of foreclosure or express threat of foreclosure, divorce, court order, judgment, condemnation, or probate.
 - 14. Documents involving the partition of land between tenants in common, joint tenants, or tenants by the entirety.
 - 15. Transfer to a charity, not-for-profit organization, or government.

D. PREPARER

DELONG, JENNI
Preparer of the Sales Disclosure Form
 250 MAIN STREET, STE 550
Address (Number and Street)
 LAFAYETTE IN 47901
City, State, and ZIP Code

CLOSING AGENT
Title
 ADVANTAGE TITLE INC
Company

Telephone Number *E-mail*

E. SELLER(S)/GRANTOR(S)

MILAKIS HOMES LLC
Seller 1 - Name as appears on conveyance document
 PO BOX 496
Address (Number and Street)
 LAFAYETTE IN 47902
City, State, and ZIP Code

Telephone Number *E-mail*

Seller 2 - Name as appears on conveyance document

Address (Number and Street)

City, State, and ZIP Code

Telephone Number *E-mail*

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, "Real Property Sales Disclosure Act".

Signature of Seller
 MILAKIS HOMES LLC
Printed Name of Seller 8/18/2016
Sign Date (MM/DD/YYYY)

Signature of Seller

Printed Name of Seller *Sign Date (MM/DD/YYYY)*

F. BUYER(S)/GRANTEE(S) – APPLICATION FOR PROPERTY TAX DEDUCTIONS– IDENTIFY ALL ITEMS THAT APPLY

STEVENSON, ASHLEY
Buyer 1 - Name as appears on conveyance document
 7400 WESLEYAN DR
Address (Number and Street)
 DAYTON IN 47941
City, State, and ZIP Code

Telephone Number *E-mail*

STEVENSON, LISA
Buyer 2 - Name as appears on conveyance document
 7400 WESLEYAN DR
Address (Number and Street)
 DAYTON IN 47941
City, State, and ZIP Code

Telephone Number *E-mail*

THE SALES DISCLOSURE FORM MAY BE USED TO APPLY FOR CERTAIN DEDUCTIONS FOR THIS PROPERTY. IDENTIFY ALL OF THOSE THAT APPLY.

YES	CONDITION
<input checked="" type="checkbox"/>	1. Will this property be the buyer's primary residence? Provide complete address of primary residence, including county: 7400 WESLEYAN DR <i>Address (Number and Street)</i> DAYTON IN 47941 Tippecanoe <i>County</i> <i>City, State ZIP Code</i>
<input checked="" type="checkbox"/>	2. Does the buyer have a homestead in Indiana to be vacated for this residence? If yes, provide complete address of residence being vacated, including county: 284 DAYTON RD <i>Address (Number and Street)</i> DAYTON IN 47941 Tippecanoe <i>County</i> <i>City, State ZIP Code</i>

YES	CONDITION
<input checked="" type="checkbox"/>	3. Homestead
<input type="checkbox"/>	4. Solar Energy Heating/Cooling System
<input type="checkbox"/>	5. Wind Power Device
<input type="checkbox"/>	6. Hydroelectric Power Device
<input type="checkbox"/>	7. Geothermal Energy Heating/Cooling Device
<input type="checkbox"/>	8. Is this property a residential rental property?
<input type="checkbox"/>	9. Would you like to receive tax statements for this property via e-mail? <i>(Provide contact information below. Please see instructions for more information. Not available in all counties.)</i>

Primary property owner contact name *E-mail*

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, "Real Property Sales Disclosure Act". (Note: Spouse information, Social Security and Driver's License/Other numbers are not necessary if no Homestead Deduction is being filed.)

Signature of Buyer1
 STEVENSON, ASHLEY
Printed Legal Name of Buyer 1 8/18/2016
Sign Date (MM/DD/YYYY)

Signature of Buyer2/Spouse
 STEVENSON, LISA
Printed Legal Name of Buyer 2/Spouse 8/18/2016
Sign Date (MM/DD/YYYY)

Last 5 digits of Buyer 1 Driver's License/ID/Other Number *Last 5 Digits of Social Security Number*

Last 5 digits of Buyer 2/Spouse Driver's License/ID/Other Number *Last 5 Digits of Social Security Number*

PART 2 - COUNTY ASSESSOR

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

1. Property	2. AV Land	3. AV Improvement	4. Value of Personal Property	5. AV Total	6. Property Class Code	7. Neighborhood Code	8. Tax District	9. Acreage
A.)	\$3,600	\$21,800	\$0	\$25,400	199	6680	79013	10.2500
B.)								

Assessor Stamp	10. Identify physical changes to property between March 1 and date of sale.	YES	CONDITION
		<input checked="" type="checkbox"/>	11. Is form completed?
		<input checked="" type="checkbox"/>	12. State sales fee required?
			13. Date of sale (MM/DD/YYYY): <u>8/18/2016</u>
			14. Date form received (MM/DD/YYYY): <u>8/19/2016</u>

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.	YES	CONDITION
	<input type="checkbox"/>	16. Sale valid for trending?
	<input type="checkbox"/>	17. Validation of sale complete?
		18. Validated by: _____

PART 3 - COUNTY AUDITOR

Auditor Stamp	1. Disclosure fee amount collected: \$ <u>\$10</u>	YES	CONDITION
	2. Other Local Fee: \$ <u>\$5</u>	<input checked="" type="checkbox"/>	6. Is form completed?
	3. Total Fee Collected: \$ <u>\$15</u>	<input checked="" type="checkbox"/>	7. Is state fee collected?
	4. Auditor receipt book number: <u>57799</u>	<input type="checkbox"/>	8. Attachments complete?
	5. Date of transfer (MM/DD/YYYY): <u>8/19/2016</u>		

PART 4 - RECEIPT FOR STATEMENT OF DEDUCTION OF ASSESSED VALUATION

<u>C79-2016-1825965</u>	<u>10/26/2016</u>	<u>STEVENSON, ASHLEY</u>
<i>SDF ID</i>	<i>SDF Date (MM/DD/YYYY)</i>	<i>Buyer 1 - Name as appears on conveyance document</i>
<u>791209131003000013</u>	<u>791209131003000013</u>	<u>7400 WESLEYAN DR</u>
<i>Parcel Number</i>		<i>Address of Property (Number and Street)</i>
Check all that apply:		<u>DAYTON IN 47941</u>
<input checked="" type="checkbox"/> Homestead	<input type="checkbox"/> Solar Energy	<input type="checkbox"/> Wind Power
<input type="checkbox"/> Hydroelectric	<input type="checkbox"/> Geothermal	<input type="checkbox"/> Rental Property
Electronic Statement (e-mail) _____		<u>8/19/2016</u>
		<i>Auditor Signature</i> _____ <i>Date (MM/DD/YYYY)</i>

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 Class C felony.

791209131003000013

Tax District: 79013 DAYTON TOWN-TSC

C79-2016-1825965

Property Address

7400 WESLEYAN DR DAYTON 47941

Number Parcels: 1

Legal Description

NW 1/4 9 -22 -3

Split Land Improvement

AV Land	AV Imp	Personal Property	AV Total	Prop Class	Neighborhood	Acreage
\$3,600	\$21,800	\$0	\$25,400	199	6680	10.2500

Physical Changes