

CITY OF CLEVELAND

CERTIFICATE OF DISCLOSURE APPLICATION FOR TRANSFERRING RESIDENTIAL PROPERTY (1-4 UNITS)

File No: Fee: \$60.00

Escrow/Transferring Agent must ensure this form is completed in its entirety prior to transfer. Indicate "NA" for all questions that do not apply.

PART A: TO BE COMPLETED BY ESCROW/TRANSFERRING AGENT

DATE:

| Duamantis Address. | Tu 1 1 |
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| Property Address: | Name, Business Address, Telephone Number, State License |
| Permanent Parcel Number: | Number for all Real Estate Agents and/or Brokers involved in |
| Sub Lot No: | this transaction. (Attach a separate sheet of paper if necessary.) |
| Seller's Name(s): | |
| Address: | |
| | |
| Telephone Number: | |
| Transfer Date of Property to Seller: | |
| If seller is a corporation, please indicate on a separate sheet of paper the names, | |
| addresses and telephone numbers for the statutory agent and officers. | |
| Purchaser's Name(s): | Name Business Address Tolonhans Number of the first and if |
| | Name, Business Address, Telephone Number of the first and, if |
| Address: | applicable, subsequent mortgagee. (Attach a separate sheet of paper if |
| Telephone Number: | necessary.) |
| If purchaser is a corporation, please indicate on a separate sheet of paper the | |
| names, addresses and telephone numbers for the statutory agent and officers. | |
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| Appraiser's Name: | |
| Business Name: | |
| Business Address: | |
| Telephone Number: | |
| License Number: | Name, Address, Telephone Number of any/all assignees. (Attach a |
| | separate sheet of paper if necessary.) |
| State Certification Number: | - Soparate sheet of paper if hosessary, |
| Loan Originator's Name: | |
| Business Name: | |
| Business Address: | |
| | |
| Telephone Number: | 4 |
| Title Company's Name: | |
| Business Address: | |
| Telephone Number: | Was Purchase Agreement Signed? Yes □ No □ |
| <u> </u> | |
| I, hereby, attest the above information is true to the best of my a | actual knowledge this day of |
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| Escrow/Transferring Agent | |
| The above section must be completed by the escrow/transferring a | agent prior to closing, transferring and filing with the County of Cuyahoga. |
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| PART B: TO BE COMPLETED BY OWNER | |
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CITY OF CLEVELAND CERTIFICATE OF DISCLOSURE APPLICATION FOR TRANSFERRING RESIDENTIAL PROPERTY (1-4 UNITS)

File No: Fee: \$60.00

Escrow/Transferring Agent must ensure this form is completed in its entirety prior to transfer. Indicate "NA" for all questions that do not apply.

If violations and/or a condemnation history is found on the referenced property, the Purchaser shall sign the current Violation Notice and/or condemnation history as attachments to the purchase agreement and those documents are to be forwarded to Records Administration in Room 517 along with a signed copy of Parts A through D of the Certificate of Disclosure Application for filing.

If no violations and/or condemnation history is found on the referenced property, the signed Certificate of Disclosure Application will be mailed to the Escrow Agent.

The processing fee of \$60.00 must accompany the Certificate of Disclosure Application. If the processing fee is not enclosed, the application process will not be completed. Any questions can be directed to Records Administration at (216) 664-2826.

Note: For all rental properties, the rental fees must be current before the Certificate of Disclosure Application is released. Any delinquencies must be collected at this time.

Ordinance #1864-01 mandates the completion of the Certificate of Disclosure form for all 1-4 family unit transactions prior to the sale or disbursement of funds.

Violation of this Housing Code is a penalty of not less than \$50.00 and no more than \$500.00 for the first offense, and for a second or subsequent offense shall be fined not less than \$100.00 or no more than \$1,000.00 or imprisoned for not more than six months or both. A separate offense shall be deemed committed each day during or on which an offense occurs or continues.