



Government of the District of Columbia

Office of Tax and Revenue

Recorder of Deeds
1155 Constitution Avenue, NW
Washington, DC 20004
Phone (202)727-5374

Real Property Recordation and Transfer Tax Form FP 7/C

PART A - Type of Instrument

- Deed Tax Deed Deed of Trust Trustee Deed
- Easement Modification Lease Other

PART B - Property Description/Data/Property Being Conveyed

Square	Suffix	Lot		Square	Suffix	Lot

If more than one lot, list Square/Suffix/Lots below or attach addendum:

Square and/or Parcel **Lot(s)**

Property Address **Unit No.**

Street Number Street Name Quadrant

Property Use Residential Commercial Condominium Apartment

In addition to the use above, is this property being rented? Yes No

Interest Transferred Fee Leasehold Leasehold Improvement

Easement Other

Interest Conveyed % Does this transfer include Condo Parking? Yes No

If YES, what is the parking account?

Square Suffix Lot

Sale Type Single/Parcel Improved - Arms Length

Single/Parcel Vacant - Arms Length

Multiple Parcels Arms Length Not Arms Length

Date of Deed **Consideration \$** (Part H, Line #1)

Was personal property included in this transfer? Yes No

If YES, what type? Estimated Value \$

PART C - Instrument Submitted by or Contact Person

Name **Firm**

Address

City **State** **Zip**

PART D - Return Instrument To

Name **Firm**

Address **Phone**

City **State** **Zip**

PART E - Grantor(s) Information

Grantor	Grantor
Grantor	Grantor
Address	Phone
City	State
	Zip



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		Square	Suffix	Lot
Grantor Tenancy	Tenants in Common	Joint Tenants	Trustee	
	Tenants by Entireties	Sole		

PART F - Grantee(s) Information

Grantee	Grantee
Grantee	Grantee
Address	Phone
City	State
	Zip

Grantee Tenancy	Tenants in Common	Joint Tenants	Trustee
	Tenants by Entireties	Sole	

Interest Acquired

PART G - Mailing Address for Grantee (If different from Part F)

Last Name	First Name	Middle Name
Unit #	Address	
City	State	Zip
Phone		

PART H- Consideration and Financing (complete

**Tax Exemption Application
Recordation Tax/Transfer Tax**
(Cite to Specific DC Code Provision)

I. Deed

1. Acquisition Price	_____	_____/_____
<i>Cash</i>	_____	_____/_____
<i>Amount of 1st Deed of Trust</i>	_____	
Exempt Amount(s)		
Purchase Money Amount	_____	_____
Other Exempt Amount	_____	_____
Nonexempt Amount(s)	_____	
<i>Amount of 2nd Deed of Trust</i>	_____	
Exempt Amount(s)		
Purchase Money Amount	_____	_____
Other Exempt Amount	_____	_____
Nonexempt Amount(s)	_____	
<i>Assumed</i>	_____	
Exempt Amount(s)	_____	
Purchase Money Amount	_____	_____
Other Exempt Amount	_____	_____
Nonexempt Amount(s)	_____	
2. Latest Assessed Value if No or Nominal Consideration (less than 30% of assessed value)	_____	_____/_____



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Washington, DC 20024
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II. Deeds of Trust (no transfer of title)

Amount of 1st Deed of Trust _____
 Exempt Amount(s) _____
 Nonexempt Amount(s) _____

Amount of 2nd Deed of Trust _____
 Exempt Amount(s) _____
 Nonexempt Amount(s) _____

3. Total of all Nonexempt Deeds of Trust (I & II) _____

PART I: Computation of Tax

If the residential deed transfer is for a total consideration of less than \$400,000 use Lines 1 and 2.
 All other deed transfers, security instruments and commercial transactions use Lines 3,4,5 and 6.

- 1. Recordation Tax 1.1% of Line 1 or Line 2, Part H
- 2. Transfer Tax 1.1% of Line 1 or Line 2, Part H
- 3. Recordation Tax 1.45% of Line 1 or Line 2, Part H
- 4. Transfer Tax 1.45% of Line 1 or Line 2, Part H
- 5. Recordation Tax 1.45% of Line 3, Part H
- 6. Transfer Surtax 5% of Line 1 or Line 2, Part H (retail service sta.)

\$
\$
\$
\$
\$
\$
\$

7. Total of Lines 1 & 2 OR 3, 4, 5 and 6

PART J: Affidavit (Part A to J)

I/We hereby swear or affirm under penalty of perjury that this return, including any accompanying schedules/documents/and statements, has been examined by me/us and to the best of my/our knowledge and belief, the statements and representations are correct and true. I/We hereby acknowledge that any false statement or misrepresentations I/We made on this return is punishable by criminal penalties under the laws of the District of Columbia.

Grantor(s)	Grantee(s)
Typed Name	Typed Name
_____ Signature	_____ Signature
Date	Date
Subscribed to and sworn to before me by Grantor(s) this _____ day of _____, 201 .	Subscribed to and sworn to before me by Grantee(s) this _____ day of _____, 201 .
_____ Notary Public	_____ Notary Public
My Commission Expires: mm/dd/yyyy	My Commission Expires: mm/dd/yyyy

**This information is subject to audit within three years of filing.
Please keep all supporting documentation.**