

City of Calumet City
Department of Inspectional Services
708/891-8120

POINT OF SALE NOTICE OF INTENT TO TRANSFER PROPERTY

The property is being offered for sale/transfer and the undersigned, as the owner or authorized agent, hereby requests the City of Calumet City to inspect the premises hereinafter described, both interior and exterior, or hereby refuses to consent to said inspection, as required by the Municipal Code of Calumet City. Applicant acknowledges that a copy of the Point of Sale Inspection Ordinance (14-1) is available upon request from the Clerk's Office of Calumet City, Illinois or on-line at www.calumetcity.org. I (owner/authorized agent) acknowledge I have the right to refuse consent to inspect the property, in which case the City may seek a warrant (*within ten days of this signed notice*) to conduct the inspection.

Property Address: _____, Calumet City, Illinois 60409
Current Owner(s) Name(s): _____ Home/Cell Phone: _____
Current Owner(s) Address: _____ Business Phone: _____

If land trust, identify all beneficiaries with names and addresses on an attached sheet*

Property Type: Residential _____ Commercial _____ Multifamily _____ (No. of Units) _____
Listing Agent: _____ Company _____ Phone _____
Prospective buyer (include all buyers to prospective deed)* _____
Will the buyer occupy the property? Yes _____ No _____ Buyer's Phone: _____
Date of Closing _____ Contract Price \$ _____ Loan: FHA/HUD ___ Conven. ___ Cash ___

Owner/Authorized Agent: **I consent to the Point of Sale Inspection.**
Signature: _____ Date: _____

Owner/Authorized Agent: **I refuse to consent to the Point of Sale Inspection.**
Signature: _____ Date: _____

Buyer is aware that NO inspection is taking place on the property.

Buyers' Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE – FOR OFFICIAL USE ONLY

Scheduled Inspection Date: _____ Inspector's Initials _____
(Upon consent of inspection, schedule within 28 days of this signed notice.)

Inspectional Service Clerk: _____ Fee: \$ _____

Fee Paid By (*Circle One*) Cash Check Credit Card Date: _____

Clerk's Office Signature: _____

Single-Family: \$150.00 (each additional unit is \$25.00) Commercial: \$0.20 per sq. ft. (\$150.00 minimum)

FEES: Point of Sale Inspections

\$150.00	All single-family residential buildings for the initial inspection and one re-inspection.
\$ 25.00	Each additional unit for multi-family buildings
\$ 0.20 sq.ft.	All commercial and industrial buildings with the minimum fee of \$150.00
\$ 50.00 per unit	Additional follow up inspections on all buildings after the initial and first re-inspection and missed appointments.

All Point of Sale Inspections are valid for a period of not more than 180 days (six months) from the date of the initial inspection.

The Calumet City Point of Sale Ordinance (Section 14.1) and any amendments to said Ordinance is available upon request from the City Clerk's Office or on-line at www.calumetcity.org.

Codes:

1. City of Calumet City Point of Sale Ordinance
2. City of Calumet City Administrative Provisions Ordinance
3. 2003 International Fire Code
4. 2004 Illinois Plumbing Code with Local Amendments
5. 2011 Chicago Electrical Code with Local Amendments
6. 2006 International Mechanical Code
7. 2006 International Building Code
8. 2006 International Residential Code
9. 2006 International Property Maintenance Code (IPMC)

Required Documents For Real Estate Transfers:

1. Real Estate Transfer Declaration Form (see attached)
2. 2 Copies of Deed
*IF PROPERTY IS FORECLOSED, MUST HAVE JUDICIAL DEED
3. Consent to Accept Form (see attached)
4. Liens, tickets/violations must be paid prior to transfer of property

Final Water Bill:

It is the responsibility of the seller to comply with the following:

1. Request a final water meter reading at **least four days prior** to the closing of the property.
2. The final water bill **must be paid** before the transfer stamps will be issued.
3. Payment of the final water bill must be paid in **cash, cashier's check, or money order**. **No personal checks** will be accepted as payment.

Make final water bill payment to:

City of Calumet City
Water Billing Department
204 Pulaski Road
Calumet City, Illinois 60409
708/891-8121

CONSENT TO ACCEPT A CONDITIONAL CERTIFICATION OF COMPLIANCE TO BE EXECUTED BY BUYER(S)

Whereas, the City of Calumet City enacted an ordinance authorizing a Point of Sale Inspection for the sale of all one-family, two-family, and Multi-family dwelling unit structures and/or commercial and industrial structures within the City of Calumet City; and

Whereas, the Ordinance in Section 14-1 provides that the Buyer may agree to accept the responsibility of bringing the structure into compliance with all applicable code requirements within a period not to exceed one hundred and eighty (180) days after the closing of the transaction and a **CONDITIONAL CERTIFICATION OF COMPLIANCE SHALL BE ISSUED IN ORDER TO ALLOW THE TRANSACTION (CLOSING) TO BE COMPLETED.**

Pursuant to that provision of said Ordinance, the Buyer(s), hereinafter delineated below, does hereby execute an agreement with the City of Calumet City that the Buyer(s) shall be required to comply with all building code requirements of the City of Calumet City as provided in that certain Pont of Sale Inspection in order to grant such **CONDITIONAL CERTIFICATION COMPLIANCE**. In the event the Buyer(s) fail to take such action, the City of Calumet City shall be entitled to seek all remedies at law against the Buyer(s) who have executed this agreement. It is the responsibility of the Buyer(s) to see that this **CONDITIONAL CERTIFICATION OF COMPLIANCE** is fully complied with, within the time limit provided herein.

The Buyer(s) acknowledges the **CONDITIONAL CERTIFICATION OF COMPLIANCE**, which they have executed this date, was given solely on the consideration to allow the closing to take place. Further, the Buyer(s) acknowledges the responsibility to complete all requirements pursuant to the **CONDITIONAL CERTIFICATION COMPLIANCE** and acknowledges that they have received a copy of the Point of Sale Inspection completed by the City of Calumet City. Failure to abide by this **CONDITIONAL CERTIFICATION OF COMPLIANCE** will result in further action by the City of Calumet City, as so described in the Ordinance. It is the responsibility of the Buyer(s) to obtain a final inspection within the above time frame of 180 days.

The Buyer(s) executes this document by his/her own hand on this ____ day of _____ 20____

Property Address: _____, Calumet City, IL 60409, State of Illinois

Date of Closing: _____ Compliance No. _____ County of Cook

This instrument was acknowledged before me on _____

By _____

Signature of Notary Officer

(Notary Stamp)

Buyer(s) – Print

Buyer(s) – Original Signature Only Accepted

THIS PROPERTY CAN NOT BE RESOLD OR TRANSFERRED UNTIL THE ABOVE INSPECTION IS FINALIZED NO EXCEPTIONS!

**REAL ESTATE
TRANSFER DECLARATION**
(Transfers up to & including \$2 million)

Stamp No. _____
(Revenue Stamps to be Affixed to Deed)

Date Issued _____

Water Balance _____

Inspectional Serv. _____

Date of Deed _____

Type of Deed _____

It is recommended that transfer stamps
be picked up at least 48 hours in advance.
Allow at least a half hour to process.

READ BACK OF THIS APPLICATION

PLEASE NOTE:
The cost of the stamp is:

\$4.00 per \$1,000 or part thereof	Buyer's expense
\$4.00 per \$1,000 or part thereof	Seller's expense
TOTAL \$8.00 per \$1,000 or part thereof	

CITY OF CALUMET CITY

OFFICE OF THE CITY CLERK

NYOTA T. FIGGS

(708) 891-8110

Monday-Friday 9:00 a.m. - 5:00 p.m.

Address of Property _____

Calumet City, IL 60409
(If property is a vacant lot, please attach legal description)

Thornton Township

Full action consideration \$ _____

Less amount of personal property included in purchase \$ _____

Net consideration for real estate \$ _____

Net taxable consideration to be covered by stamps \$ _____

TOTAL Amount of tax stamps paid by: (CIRCLE ONE) SELLER BUYER BOTH \$ _____

**TO BE PAID BY
Certified Check
Money Order
or Cash
ONLY**

If EXEMPT: Transaction is exempt under paragraph _____ of Sec. 82-323 of the Calumet City Municipal Code.

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

The person executing this signature block swears and affirms under penalty of perjury that the information is true and correct. Failure to comply with this provision may result in prosecution.

PRINT NAME: _____ SIGN _____

Name & Address of Seller/Owner/Grantor: _____
Name _____
Address _____
City _____ State _____
Zip _____ Phone # _____

**If Exempt, Copy
of Deed Must
Be Submitted.**

Name & Address of Buyer/Grantee: _____
Name _____
Address _____
City _____ State _____
Zip _____ Phone # _____

Agent's Name & Company Name _____

Agent must be a licensed attorney and/or
licensed broker/realtor or the owner of record.
In the event the party requesting is an agent,
please put your bar number and/or broker's
license number below your name.

Bar and/or Broker's License # _____
(CIRCLE ONE)

Address _____

City _____ State _____

Zip _____ Phone # _____