

STATE OF DELAWARE Division of Revenue 820 N. French Street P.O. Box 8763 Wilmington,Delaware 19899-8763

CLAIM FOR REFUND OF REALTY TRANSFER TAXES BY FIRST TIME HOME BUYER **FORM 5405**

DF24118019999

Rev. Code 0050

PART A - TAXPAYER INFOR	RMATION			
1. Purchaser Name:			SSN:	
2. Purchaser Name (If more than one):			SSN:	
3. Mailing Address:				
City:	State:	Zip Code:		
PART B - PROPERTY LOCAT	TION		Co	unty
1. Address:				New Castle
City:	State:	_ Zip Code:		Kent Sussex
2. Date of real estate purchase:	3. Date of execu	tion of real estate contract:	1 1	
the property being conveyed as his or b. Spouses purchasing as journed as the state, wherever located, and bother and state, wherever located, and bother action. By signing and submitting the the definition of a "First Time Home Buyer"	amount of the refund due. This ualify as a first-time home buyer, at no time held any direct legal her principal residence within 90 bint tenants or tenants by the enth of whom intend to occupy the joint tenants or cotenants, where whom intend to occupy the prop	amount cannot exceed \$2,0, you must meet one of the finterest in residential real est days following the transactirety, when neither spouse is property being conveyed as none of the individuals has erty being conveyed as their devenue, the undersigned hereball amount of the realty transactions.	following definitions: state, wherever located, tion. has ever held any direct their principal residence s ever held any direct le r principal residence wit	and who intends to occupy t legal interest in residential e within 90 days following the gal interest in residential real thin 90 days following the trans
Taxpayer Signature			Taxpayer Sig	nature
Dated:				
Sworn before me on this	day of	_, 20		
Notary				(Rev 7/2018)
<u></u>				

INSTRUCTIONS PART A - TAXPAYER INFORMATION

Line 1 Enter the name and social security number of the taxpayer seeking the refund. If multiple individuals were involved in the purchase of the property, list all of their names and social security numbers in this section.

Line 3. Enter the mailing address for the refund.

PART B - PROPERTY LOCATION

- Line 1. Enter the exact location of the real estate in connection with which you are seeking a refund of Realty Transfer Taxes paid.
- Line 2. Enter the date on which you purchased the real estate listed in Line 1 above.
- Line 3. Enter the date of execution of the contract pursuant to which you purchased the real estate listed in Line 1 above. Please note that if your contract was executed before August 1, 2017, you do not qualify for a refund of Realty Transfer Tax paid.

PART C - COMPUTATION OF REFUND AMOUNT

- Line 1. Enter the amount from Line 4 of Form 5402 as originally filed. This will be the greater of the consideration paid and the highest assessed value (for local tax purposes) for the property.
- Line 2. Pursuant to 30 Del. C. § 5402(c), the discounted rate for a first time home buyer can apply to no more than \$400,000 of the purchase price of the property.
- Line 4. Multiply Line 2 by Line 3. This is the amount of the refund of Realty Transfer Taxes due. Because the reduced rate can apply to no more than \$400,000, the maximum refund available is \$2,000.

Mail Refund Claims to: Delaware Division of Revenue 820 N. French Street P.O. Box 8763 Wilmington, Delaware 19899-8763