



REQUEST FOR STATEMENT OF OPEN ACCOUNTS

This Form Must Be Submitted **Prior To Purchase Of A Real Estate Transfer Stamp**

1. Please e-mail completed form to: soa@naperville.il.us or fax to 630-305-6226
2. Do not send any other documents with this Statement of Open Accounts Form.
3. This is NOT a request for Tax Stamp purchase.
4. After this statement has been approved, you may apply for the purchase of a Tax Stamp.
5. This request must be received at least 48 hours (2 business days) prior to closing for non-rental/non-foreclosure single family homes/townhomes/condos, and at least 7 days prior to closing for all other residential/commercial properties.

Foreclosure: YES NO **How long have you owned the property:** _____

Has This Property Been used as a Rental Property? YES NO

Permanent Real Estate Index No. (PIN): _____

Address of Property: _____
Street Address City State Zip

Type of Property: Single Family: Condo/Townhouse (Detached or Attached)
 Commercial/Industrial _____ Vacant Lot
(Specify Type - Apartment Complex/Restaurant/Manufacturing/etc.)

SELLER INFORMATION: _____
Name of Seller or Current Owner

Address _____ City _____ State _____ Zip _____

Seller's Signature: X
 I affirm that I have the authority to sign this form either as the Seller or authorized representative of the seller.

Approved Statement Should Be Returned To:

Contact Name: _____ Telephone _____

E-Mail: _____

Steps To Be Taken After The Statement Of Open Accounts Has Been Approved:

1. This is **not a final bill**. Seller/Owner is still required to terminate their utility service.
2. The Real Estate Transfer Declaration form must be completed and submitted along with the proper paperwork after the Statement of Open Accounts has been approved.
3. The Real Estate Transfer Declaration form and instructions can be found on the City website

Location ID _____ **For City Use Only**

Type of Account	Past Due Payable prior to Stamp Issuance	Other Amounts Due	Date Other Due By	Total Outstanding
Utility Account:				
Misc. Receivable:				
Bldg Fees:				

Lien: YES NO If property is a Restaurant, Hotel/Motel, or Fuel Station Tax _____

This Statement of Open Accounts is valid through: _____
 Date Completed: _____ Completed By: _____

This is NOT the actual Account Statement; this is only a request for information.
 If You Do Not Receive A Completed Statement Of Open Accounts From The Finance Department
 Please Contact Us At 630-420-6059.

Rev. 06/09/15 LMH