

Affidavit of Delivery

TITLE #:

DATE:

State of New York)

County of _____) ss:

_____, being duly sworn, deposes and says:

1. That (s)he is over 18 years of age and has an office at _____
_____.
2. That (s)he is a _____ at _____
_____.
3. That on _____ (s)he delivered the following document(s), _____
_____, to the Office of the
City Register, County of _____ for recordation against Tax Block
_____, Lot(s) _____.
4. That the following are attached hereto: a copy of the above listed document, a copy of
the recording and endorsement cover page, copy of the payment cover page and a copy
of the receipt for payment of filing fees.

Sworn to before me this _____
day of _____, 20__

Notary Public