

SCTP No.: 3-35 8.00 33.00 p/o

Prepared by:

Mitchell's Corner LLC
c/o Morris James LLP
107 W. Market Street
Georgetown, DE 19947

Return to:

State of Delaware Department of Transportation Real Estate Section
800 Bay Road, Box 778
Dover, Delaware 19903

PERMANENT EASEMENT AGREEMENT

This Permanent Easement Agreement ("Agreement") is made and entered into this _____ day of _____ 2024, by and between CITY OF LEWES, a municipality of the State of Delaware, successor to the COMMISSIONERS OF LEWES, TO AND FOR THE USE OF THE BOARD OF PUBLIC WORKS, and THE BOARD OF PUBLIC WORKS OF THE CITY OF LEWES, a chartered utilities Board of the State of Delaware, (hereinafter referred to collectively as the "GRANTOR"), and THE STATE OF DELAWARE, acting by and through the DEPARTMENT OF TRANSPORTATION, with an address of 800 Bay Road, Box 778, Dover, Delaware 19903, (hereinafter referred to as "DELDOT" or "GRANTEE").

WHEREAS, the GRANTOR is the legal and equitable owner of all that certain tract, piece, or parcel of real property, consisting of 18.25 Acres, situated on the northwesterly line of Kings Highway (SCR 268), and being located in Lewes and Rehoboth Hundred, Sussex County and the State of Delaware, as more particularly described in those certain Deeds of record in the Office of the Recorder of Deeds in and for Sussex County, Georgetown, Delaware, in Deed Book 447, Page 58, and Deed Book 350, Page 362 (hereinafter referred to as the "Property"); and

WHEREAS, the GRANTEE is desirous of obtaining a permanent easement over, under, and across part of the Property described hereinafter.

NOW THEREFORE for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the GRANTOR does by these presents, grant, bargain, sell, convey, and confirm unto the GRANTEE and/or its successors, assigns and contractors, a Non-exclusive, Permanent Easement in connection with the road improvements to be made to Kings Highway (SCR 268), for any and all highway related purposes ("Facilities") including drainage improvements, grading and the right of DELDOT to grant a public utility a franchise, permit or easement to install and maintain its facilities in, over or across said lands and premises, being more particularly described as follows:

BEING all that strip or piece of land, hereinafter described, situate, lying and being on the northwesterly side of Kings Highway (SCR 268), and being located in the Lewes & Rehoboth Hundred, Sussex County, Delaware; said strip or piece of land being a 16 foot wide Permanent Easement as shown on an exhibit titled “Kings Highway (SCR 268), Mitchell’s Corner, Easement Exhibit” prepared by Davis, Bowen & Friedel, Inc., dated December, 2023; attached hereto as Exhibit A, said strip or piece of land being more particularly described as follows:

BEGINNING at a point formed by the intersection of the northwesterly right-of-way line of said Kings Highway with the northeasterly line of the lands of, now or formerly, Sussex County, The Board of Public Works of the City of Lewes, and the City of Lewes, as recorded in the Office of the Recorder of Deeds in and for Sussex County and the State of Delaware in Deed Book 5364, Page 95, thence,

1) leaving said Kings Highway and running by and with said Sussex County lands, North 47 degrees 55 minutes 06 seconds West 17.10 feet to a point, thence,

2) leaving said Sussex County land and running through the lands of, now or formerly, City of Lewes, as recorded in said Office of the Recorder of Deeds in Deed Book 447, Page 58, North 21 degrees 27 minutes 38 seconds East 209.51 feet to a point on the aforesaid right-of-way line of Kings Highway, thence,

3) running by and with said Kings Highway, the following two courses and distances, South 47 degrees 44 minutes 53 seconds East 17.11 feet to a point, thence running,

4) South 21 degrees 27 minutes 38 seconds West 209.45 feet to the point and place of beginning;

CONTAINING 3,345 square feet of land, more or less (the “Easement Area”).

FURTHER, the GRANTOR shall not use the Easement Area in any way that will interfere with or be detrimental to the present or future use of the Easement Area by the GRANTEE.

FURTHER, the GRANTEE, its successors and assigns, covenants and agrees to provide for the maintenance of all of the Facilities in the permanent Easement Area to ensure that the Facilities are and remain in proper working condition, in accordance with the approved plans for Kings Highway and all applicable standards, rules, regulations and laws. After completion of any work in the permanent Easement Area, Grantee shall restore the surface of the area affected. GRANTOR, its successors and assigns, shall perform necessary grass cutting, trash removal and other routine aesthetic maintenance of the permanent Easement Area.

FURTHER, DELDOT shall be granted unconditional access to the permanent Easement Area in order to perform emergency maintenance procedures as DELDOT, in its sole discretion, shall deem necessary and/or appropriate.

FURTHER, should this easement ever be abandoned by the Grantee and DelDOT, inclusive, or by mutual agreement, then this easement shall terminate, be null and void, and will no longer encumber the Easement Area, and such action shall be evidenced by a recorded release and termination of this Agreement by DelDOT.

BEING over and through a portion of the same lands conveyed to the Commissioners of Lewes, To and For the use of The Board of Public Works, by the deed of Oscar H. Warrington and Elva M. Warrington dated June 3, 1955 and recorded June 7, 1955 in the Office of the Recorder of Deeds in and for Sussex County, Georgetown, Delaware in Deed Book 447, Page 58.

ALSO BEING over and through a portion of the same lands conveyed to the Commissioners of Lewes, a municipal corporation of the State of Delaware, for the use of the Board of Public Works of the Town of Lewes, by the deed of Oscar H. Warrington and Elva M. Warrington dated February 28, 1945 and recorded March 7, 1945 in the Office of the Recorder of Deeds in and for Sussex County, Georgetown, Delaware in Deed Book 350, Page 36.

[SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, the said GRANTOR has caused his name to be hereunto set under seal, effective as of the day and year first above written.

GRANTOR:

CITY OF LEWES, a municipal corporation of the State of Delaware

By: _____ (SEAL)
Andrew Williams, Mayor

Attest: _____
Timothy A. Ritzert, Secretary

STATE OF DELAWARE :
: ss.
COUNTY OF SUSSEX :

BE IT REMEMBERED, that on this ____ day of _____, 2024, before me, the subscriber, a Notary Public in and for the State and County aforesaid, personally appeared Andrew Williams, the Mayor of the City of Lewes, a municipal corporation of the State of Delaware, party of this instrument, known to me personally to be such, and acknowledged the foregoing instrument to be his act and deed, and the act and deed of said municipal corporation; that the signature of the Mayor is in his own property handwriting; and that the act of signing, sealing, acknowledging and delivering the said instrument was first duly authorized by resolution of the City Council of the said municipal corporation.

GIVEN under my hand and seal, the day and year aforesaid.

NOTARY PUBLIC

Name Typewritten or Printed
My Commission Expires: _____

IN WITNESS WHEREOF, the said GRANTOR has caused his name to be hereunto set under seal, effective as of the day and year first above written.

GRANTOR:

BOARD OF PUBLIC WORKS OF THE CITY OF
LEWES, a chartered utilities board of the State
of Delaware

By: _____ (SEAL)
Thomas S. Panetta, President

Attest: _____
D. Preston Lee, Secretary

STATE OF DELAWARE :
 : ss.
COUNTY OF SUSSEX :

BE IT REMEMBERED, that on this ____ day of _____, 2024, before me, the subscriber, a Notary Public in and for the State and County aforesaid, personally appeared Thomas S. Panetta, Present of the Board of Public Works of the City of Lewes, a chartered utilities board of the State of Delaware, party of this instrument, known to me personally to be such, and acknowledged the foregoing instrument to be his act and deed, and the act and deed of said board; that the signature of the President is in his own property handwriting; and that the act of signing, sealing, acknowledging and delivering the said instrument was first duly authorized by resolution of the Board of the said chartered utility.

GIVEN under my hand and seal, the day and year aforesaid.

NOTARY PUBLIC

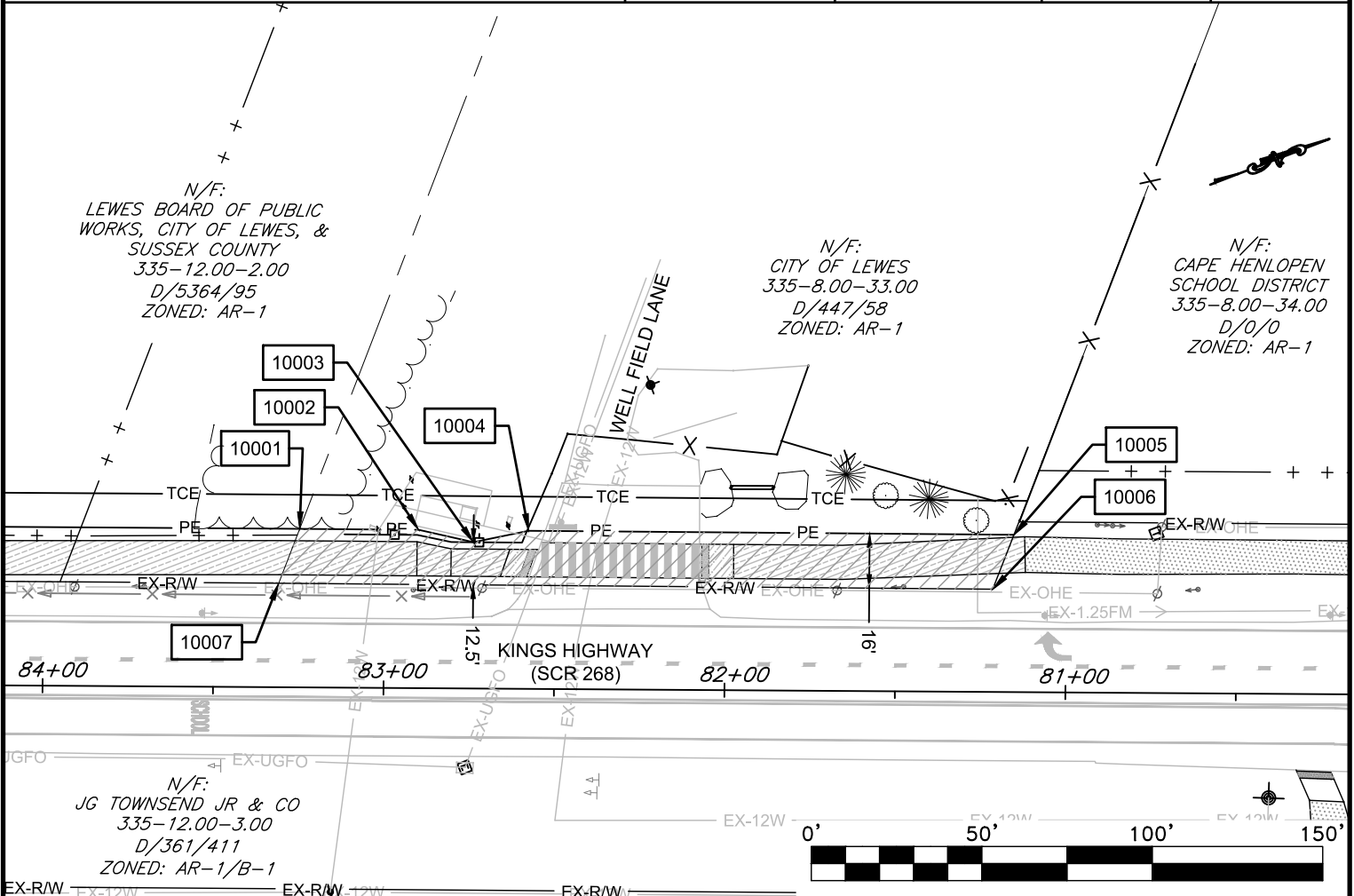
Name Typewritten or Printed
My Commission Expires:_____

METES AND BOUNDS

ASSESSMENT NUMBER	OWNERSHIP OF RECORD	TYPE OF ACQUISITION	TITLE SOURCE	PARCEL AREA
335-8.00-33.00	CITY OF LEWES	PE	D/447/58	18.25 AC

ALIGNMENT NUMBER								
PT. NO.	STATION	OFFSET	BEARING	DISTANCE	CHORD BEARING	CHORD LENGTH	ARC LENGTH	RADIUS
10001	83+24.92		N21°27'38"E	34.89'				
10002	82+90.00		N33°41'45"E	16.52'				
10003	82+73.87		N09°13'31"E	16.52'				
10004	82+57.72		N21°27'38"E	142.33'				
10005	81+15.39		S47°44'53"E	17.11'				
10006	81+21.49		S21°27'38"W	209.45'				
10007	83+30.94		N47°55'06"W	17.10'				

AREA= 3,296 SQ. FT.



Date:	MAY, 2024
Scale:	1" = 50'
Dwn.By:	TCB
Proj.No.:	3808A003
EASEMENT EXHIBIT	
Dwg.No.:	EX-05

KINGS HIGHWAY (SCR 268)
MITCHELL'S CORNER
LEWES & REHOBOTH HUNDRED
SUSSEX COUNTY, DELAWARE

DAVIS BOWEN & FRIEDEL, INC.

ARCHITECTS • ENGINEERS • SURVEYORS

EASTON, MARYLAND 410.770.4744 MILFORD, DELAWARE 302.424.1441 SALISBURY, MARYLAND 410.543.9091



**AFFIDAVIT FOR REALTY TRANSFER TAX ON UNINCORPORATED
AREAS IN SUSSEX COUNTY PURSUANT TO CHAPTER 103 OF
THE SUSSEX COUNTY CODE**

NOTE: Affidavit is required on all transactions (incorporated or unincorporated areas)

Part A — To Be Completed By GRANTOR/SELLER

NAME City of Lewes and the Board of Public Works of the City of Lewes SOCIAL SECURITY # _____
 ADDRESS P.O. Box 227 or
 CITY Lewes EMPLOYER I.D. # _____
 STATE DE ZIP 19958

Part B — To Be Completed By GRANTEE/BUYER

NAME DEPARTMENT OF TRANSPORTATION (DELDOT) SOCIAL SECURITY # _____
 ADDRESS 800 BAY ROAD, BOX 778 or
 CITY DOVER EMPLOYER I.D. # _____
 STATE DE ZIP 19901

Part C — PROPERTY LOCATION

District 3-35 Map 12.00 Parcel 33.00 (part of)

Part D — COMPUTATION OF THE TAX

1. CONVEYANCES WITH CONSIDERATION
 Enter Consideration Received \$ 0.00
2. CONVEYANCES WITHOUT CONSIDERATION
 Enter Highest Assessed Value For Local Tax Purposes \$ _____
3. Enter the Greater, Line 1 or Line 2 \$ _____
4. Multiply Line 3 times 1.50% — Tax Due and Payable \$ _____

EXEMPT CONVEYANCES: If transaction is exempt from Transfer tax, explain the basis for the exemption:

EXEMPT, CONVEYANCE TO MUNICIPALITY, S.C. Code §103-18.11

First Time Home Buyer? Yes No (If "Yes", attach First Time Home Buyer Affidavit)

Sworn and Subscribed before me on
 this _____ day of _____, 20 _____

 Seller's Signature

 Notary Public

OFFICE USE ONLY:



DELAWARE F O R M

DIVISION OF REVENUE **RTT-TAX**

REALTY TRANSFER TAX RETURN AND AFFIDAVIT OF GAIN AND VALUE

Formerly 5402



Form RTT-TAX must be completed for all conveyances and must be presented at the time of recording.

PART A - TO BE COMPLETED BY GRANTOR / SELLER(S)

TAXPAYER ID NO. _____

NAME OF GRANTOR City of Lewes

ADDRESS P.O. BOX 227

ADDRESS 2 _____

CITY LEWES

STATE DE ZIP 19958

THE GRANTOR / SELLER(S) IS A

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input checked="" type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

PART B - TO BE COMPLETED BY GRANTEE / BUYER(S)

TAXPAYER ID NO. _____

NAME OF GRANTEE DEPARTMENT OF TRANSPORTATION

ADDRESS 800 BAY ROAD, BOX 778

ADDRESS 2 _____

CITY DOVER

STATE DE ZIP 19901

THE GRANTEE / BUYER(S) IS A

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input checked="" type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

TAXPAYER ID NO. _____

NAME OF GRANTOR Board of Public Works

ADDRESS 107 Franklin Avenue

ADDRESS 2 _____

CITY Lewes

STATE DE ZIP 19958

THE GRANTOR / SELLER(S) IS A

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input checked="" type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

TAXPAYER ID NO. _____

NAME OF GRANTEE _____

ADDRESS _____

ADDRESS 2 _____

CITY _____

STATE _____ ZIP _____

THE GRANTEE / BUYER(S) IS A

<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

TAXPAYER ID NO. _____

NAME OF GRANTOR _____

ADDRESS _____

ADDRESS 2 _____

CITY _____

STATE _____ ZIP _____

THE GRANTOR / SELLER(S) IS A

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

TAXPAYER ID NO. _____

NAME OF GRANTEE _____

ADDRESS _____

ADDRESS 2 _____

CITY _____

STATE _____ ZIP _____

THE GRANTEE / BUYER(S) IS A

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

TAXPAYER ID NO. _____

NAME OF GRANTOR _____

ADDRESS _____

ADDRESS 2 _____

CITY _____

STATE _____ ZIP _____

THE GRANTOR / SELLER(S) IS A

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	

TAXPAYER ID NO. _____

NAME OF GRANTEE _____

ADDRESS _____

ADDRESS 2 _____

CITY _____

STATE _____ ZIP _____

THE GRANTEE / BUYER(S) IS A

<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary (estate or trust)
<input type="checkbox"/> S Corporation	<input type="checkbox"/> Government Agency
<input type="checkbox"/> LLC	



D E L A W A R E F O R M

D I V I S I O N O F R E V E N U E R T T - T A X

R E A L T Y T R A N S F E R T A X R E T U R N A N D A F F I D A V I T O F G A I N A N D V A L U E

Formerly 5402



PART C - PROPERTY LOCATION AND COMPUTATION OF THE TAX

1. ADDRESS P/O 3-35 12.00 33.00; Permanent Easement

CITY Lewes **STATE** DE **ZIP** 19958

COUNTY Sussex **DATE OF REAL ESTATE CONVEYANCE**

If this is a transfer of an interest in real estate through a transfer of an ownership interest in an entity, check this box and enter the name and EIN of the entity here: Name _____ EIN _____

2. Enter the amount of consideration received including cash, checks, mortgages, liens, encumbrances, and any other good and valuable consideration \$ _____

Was like kind properly exchanged? Yes No (If Yes, see instructions.)

3. Enter the **Highest** assessed value (for local tax purposes) of the real estate being conveyed \$ _____

4. Enter the **Greater** of Line 2 or Line 3 \$ _____

5. % rate of total Realty Transfer Tax due to the State, county, and/or municipality 4.0 %

6. % rate of Realty Transfer Tax due to the county or municipality %

7. % rate reduction for contracts executed prior to 8/1/17 (see instructions) %

8. % rate of Realty Transfer due to the State of Delaware (**Subtract** Lines 6 and 7 from Line 5) 4.0000 %

9. Delaware Realty Transfer Tax Before Credits. **Multiply** Line 4 by Line 8. 0.00

10. % of responsibility by	Grantor / Seller(s)	50	Grantee / Buyer(s)	50
11. Amount Due by (Multiply Line 10 by Line 9)	Grantor / Seller(s)	\$ 0.00	Grantee / Buyer(s)	\$ 0.00
12. Exclusions and Credits	Grantor / Seller(s)	\$	Grantee / Buyer(s)	\$
13. Total Amount Due by (Subtract Line 12 from Line 11)	Grantor / Seller(s)	\$ 0.00	Grantee / Buyer(s)	\$ 0.00

TOTAL PAYMENT \$ _____

PART D - EXEMPT CONVEYANCES

If transaction is exempt from realty transfer tax, please complete the information in Part C that is available (including consideration paid, if any), and explain the basis for the exemption below:

EXEMPT, CONVEYANCE TO AN AGENCY OF THE STATE OF DELAWARE PURSUANT TO 30 Del. C. §5401(1)M

The seller authorizes the Division of Revenue or such other appropriate state agency as may be designated to obtain any appropriate or necessary federal income tax forms, including the Seller(s) attached schedules or other attachments, and any other related papers filed by such seller which relate solely to the said real estate to which title is purported to be conveyed by the deed or instrument being recorded. Delaware law requires an income tax return to be filed for the taxable year during which there was disposition of real property within this state.

SELLER SIGNATURE	SELLER SIGNATURE	SELLER SIGNATURE	SELLER SIGNATURE
TITLE OF OFFICER / PARTNER	TITLE OF OFFICER / PARTNER	TITLE OF OFFICER / PARTNER	TITLE OF OFFICER / PARTNER

Sworn to and subscribed before me on _____, 20_____

NOTARY SIGNATURE _____





DELAWARE FORM DIVISION OF REVENUE REW-EST



REAL ESTATE TAX RETURN DECLARATION OF ESTIMATED INCOME TAX Formerly 5403

Form REW-EST must be completed for all conveyances, and must be presented at the time of recording.

PART 1	DESCRIPTION OF THE PROPERTY	ADDRESS OF THE PROPERTY		
	PERMANENT EASEMENT	ADDRESS	KINGS HIGHWAY EASEMENT	
	KINGS HWY	ADDRESS 2		
		CITY	LEWES	
		STATE	DE	ZIP CODE

TAX PARCEL NO. **3-35 12.00 2.00 P/O** NEW CASTLE KENT SUSSEX DATE OF TRANSFER

PART 2	TRANSFEROR/SELLER IS:	
	<input type="checkbox"/> Individual or Revocable Living Trust	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Corporation	<input type="checkbox"/> S Corporation
	<input type="checkbox"/> Trust or Estate	<input type="checkbox"/> Limited Liability Company
	<input type="checkbox"/> Business Trust	<input checked="" type="checkbox"/> Other:
		MUNICIPALITY

PART 3	TRANSFEROR OR SELLER ACQUIRED PROPERTY BY:	
	<input checked="" type="checkbox"/> Purchase	<input type="checkbox"/> Foreclosure / Repossession
	<input type="checkbox"/> Gift	<input type="checkbox"/> Other
	<input type="checkbox"/> Inheritance	
	<input type="checkbox"/> 1031 Exchange	

PART 4	TRANSFEROR/SELLER'S NAME; SSN OR EIN; AND ADDRESS TO WHICH CORRESPONDENCE IS TO BE MAILED AFTER SETTLEMENT			
	FIRST NAME	CITY OF LEWES		
	LAST NAME			
	TAXPAYER ID			
		ADDRESS	P.O. BOX 227	
	ADDRESS 2			
	CITY	LEWES		
	STATE	DE	ZIP CODE	19958

Enter only one name and SSN or EIN per return. If more than one transferor/seller, use separate forms for each; however, if transferors/sellers are spouses, enter only the primary taxpayer name and SSN, and only file one return. If transferor/seller is a pass-through entity, list EIN of the pass-through entity and attach a schedule listing each non-resident member or stockholder and their share of the tax being paid with the return.

PART 5	IF APPLICABLE, CHECK APPROPRIATE BOX. (Check no more than one box.)
	<input checked="" type="checkbox"/> Transferor/seller is a resident (a) individual, (b) pass-through entity or (c) corporation, and not subject to withholding under 30 Del. C §§ 1126, 1606 or 1909;
	<input type="checkbox"/> Sale or exchange exempt from gain realization;
	<input type="checkbox"/> Gain realized excluded from income for tax year of sale or exchange;
	<input type="checkbox"/> Sale exempt due to foreclosure. (See Instructions)

If any box in Part 5 is checked, **DO NOT** complete Parts 6, 7 and 8 below. No payment is due at this time.

PART 6	COMPUTATION OF PAYMENT AND TAX TO BE WITHHELD (See instructions.)		
	6a	TOTAL SALES PRICE	\$.00
	6b	LESS SELLING EXPENSES/REDUCTIONS TO SALE PRICE	\$.00
	6c	NET SALES PRICE (Subtract Line 6b from Line 6a)	\$ 0.00
	6d	ADJUSTED BASIS OF PROPERTY OR LIENS PAID AT SETTLEMENT	\$.00
	6e	TOTAL GAIN (Subtract line 6d from line 6c)	\$ 0.00
	6f	DELAWARE ESTIMATED INCOME TAX DUE - Multiply line 6e by 8.7% for C corp., and by 6.6% for all others	\$ 0.00

NOTE: If Part 6 is not filled out or is incomplete, the required 6.6% or 8.7% will be withheld from the net proceeds at settlement and submitted to the Division of Revenue as required by law.

PART 7	<input type="checkbox"/> Check this box if the transferor/seller is reporting gain under the installment method. No tax is payable at this time.	NOTE: If completing this section, when you recognize any gain arising from the sale of property in the State of Delaware, you must report and remit the tax due to the State of Delaware on that transaction.
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PART 8	8 DELAWARE ESTIMATED INCOME TAX PAID (See instructions)	\$.00
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Under penalty of perjury, I declare that I have examined this return and to the best of my knowledge and belief, it is true, correct and complete. If prepared by a person other than the transferor/seller, the declaration is based on all information of which the preparer has any knowledge. Transferor/Seller, please sign and print full name and title (if any):

AUTHORIZED SIGNATURE

PRINT NAME

DATE

TITLE

DFREWEST2021019999V1
Revision 20211014

MAIL COMPLETED FORM TO:
Delaware Division of Revenue
820 N. French Street
PO Box 8763
Wilmington, DE 19899-8763



DELAWARE FORM

DIVISION OF REVENUE REW-EST



REAL ESTATE TAX RETURN DECLARATION OF ESTIMATED INCOME TAX Formerly 5403

Form REW-EST must be completed for all conveyances, and must be presented at the time of recording.

PART 1	DESCRIPTION OF THE PROPERTY	ADDRESS OF THE PROPERTY		
	PERMANENT EASEMENT	ADDRESS	KINGS HIGHWAY EASEMENT	
	KINGS HWY	ADDRESS 2		
		CITY	LEWES	
		STATE	DE	ZIP CODE

TAX PARCEL NO. **3-35 12.00 2.00 P/O** NEW CASTLE KENT SUSSEX DATE OF TRANSFER

PART 2	TRANSFEROR/SELLER IS:	PART 3	TRANSFEROR OR SELLER ACQUIRED PROPERTY BY:		
	<input type="checkbox"/> Individual or Revocable Living Trust		<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Purchase	<input type="checkbox"/> Foreclosure / Repossession
	<input type="checkbox"/> Corporation		<input type="checkbox"/> S Corporation	<input type="checkbox"/> Gift	<input type="checkbox"/> Other
	<input type="checkbox"/> Trust or Estate		<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Inheritance	
	<input type="checkbox"/> Business Trust		<input checked="" type="checkbox"/> Other:	<input type="checkbox"/> 1031 Exchange	

CHARTERED UTILITY

PART 4	TRANSFEROR/SELLER'S NAME; SSN OR EIN; AND ADDRESS TO WHICH CORRESPONDENCE IS TO BE MAILED AFTER SETTLEMENT				
	FIRST NAME	BOARD OF PUBLIC WORKS	ADDRESS	107 FRANKLIN AVENUE	
	LAST NAME		ADDRESS 2		
	TAXPAYER ID		CITY	LEWES	
			STATE	DE	ZIP CODE

Enter only one name and SSN or EIN per return. If more than one transferor/seller, use separate forms for each; however, if transferors/sellers are spouses, enter only the primary taxpayer name and SSN, and only file one return. If transferor/seller is a pass-through entity, list EIN of the pass-through entity and attach a schedule listing each non-resident member or stockholder and their share of the tax being paid with the return.

PART 5 IF APPLICABLE, CHECK APPROPRIATE BOX. (Check no more than one box.)

Transferor/seller is a resident (a) individual, (b) pass-through entity or (c) corporation, and not subject to withholding under 30 Del. C §§ 1126, 1606 or 1909;

Sale or exchange exempt from gain realization;

Gain realized excluded from income for tax year of sale or exchange;

Sale exempt due to foreclosure. (See Instructions)



If any box in Part 5 is checked, DO NOT complete Parts 6, 7 and 8 below. No payment is due at this time.

PART 6 COMPUTATION OF PAYMENT AND TAX TO BE WITHHELD (See instructions.)

6a	TOTAL SALES PRICE	\$.00
6b	LESS SELLING EXPENSES/REDUCTIONS TO SALE PRICE	\$.00
6c	NET SALES PRICE (Subtract Line 6b from Line 6a)	\$	0 .00
6d	ADJUSTED BASIS OF PROPERTY OR LIENS PAID AT SETTLEMENT	\$.00
6e	TOTAL GAIN (Subtract line 6d from line 6c)	\$	0 .00
6f	DELAWARE ESTIMATED INCOME TAX DUE - Multiply line 6e by 8.7% for C corp., and by 6.6% for all others	\$	0 .00

NOTE: If Part 6 is not filled out or is incomplete, the required 6.6% or 8.7% will be withheld from the net proceeds at settlement and submitted to the Division of Revenue as required by law.

PART 7 Check this box if the transferor/seller is reporting gain under the installment method. No tax is payable at this time.

NOTE: If completing this section, when you recognize any gain arising from the sale of property in the State of Delaware, you must report and remit the tax due to the State of Delaware on that transaction.

PART 8 8 DELAWARE ESTIMATED INCOME TAX PAID (See instructions) \$.00

Under penalty of perjury, I declare that I have examined this return and to the best of my knowledge and belief, it is true, correct and complete. If prepared by a person other than the transferor/seller, the declaration is based on all information of which the preparer has any knowledge. Transferor/Seller, please sign and print full name and title (if any):

AUTHORIZED SIGNATURE

PRINT NAME

DATE

TITLE

DFREWEST2021019999V1
Revision 20211014

MAIL COMPLETED FORM TO:
Delaware Division of Revenue
820 N. French Street
PO Box 8763
Wilmington, DE 19899-8763