

Department of Revenue Services  
State of Connecticut  
PO Box 5035  
Hartford CT 06102-5035  
OP236 0417W 01 9999



**OP-236**  
**Connecticut Real Estate Conveyance Tax Return** (Rev. 04/17)

For Town  
Clerk Use  
Only ► Town Code ► Land Record

Vol. ► Pg. ►

Complete Form OP-236 in blue or black ink only.

1. Town ► LEDYARD	2. Location of property conveyed (number and street) ► 334 COLONEL LEDYARD HIGHWAY	Amended return
3. Are there more than two grantors/sellers? ► Yes If Yes, attach OP-236 Schedule A - Grantors, <i>Supplemental Information for Real Estate Conveyance Tax Return</i> .		
4. Grantor/seller #1 (last name, first name, middle initial) ► EASTCONN PROPERTIES, LLC Grantor/seller address (street and number) after conveyance ► 680 BOSTON POST ROAD	Taxpayer Identification Number ► 11-3682893 City/town ► MILFORD	► X FEIN SSN State ZIP code CT 06460
5. Grantor/seller #2 (last name, first name, middle initial) ► Grantor/seller address (street and number) after conveyance ►	Taxpayer Identification Number ► City/town ►	► FEIN SSN State ZIP code ►
6. Is the grantor a partnership, S corporation, LLC, estate, or trust? ► X Yes If Yes, attach OP-236 Schedule A - Grantors	7. Was more than one deed filed with this conveyance? ► Yes	Yes
8. If this conveyance is for no consideration or less than adequate consideration, which gift tax returns will be filed? ► Federal only State only Both fed. & state X None		
9. Is there more than one grantee/buyer or, is the grantee a partnership, S corporation, LLC, estate, or trust? ► Yes If Yes, attach OP-236 Schedule B - Grantees, <i>Supplemental Information for Real Estate Conveyance Tax Return</i> .		
10. Grantee/buyer (last name, first name, middle initial) ► TOWN OF LEDYARD Grantee/buyer address (street and number) after conveyance ► 741 COLONEL LEDYARD HIGHWAY	Taxpayer Identification Number ► 06-6002023 City/town ► LEDYARD	► X FEIN SSN State ZIP code CT 06339
11. Date conveyed (MM - DD - YYYY) ► 10 - 4 - 2022	12. Date recorded (MM - DD - YYYY) ► - - -	13. Type of instrument: ► Warranty X Quitclaim Easement Other
14. The grantor claims no tax is due because (See instructions.): ► Conveyance was for no consideration or consideration was less than \$2,000. ► X Conveyance is exempt under Conn. Gen. Stat. §12-498. Enter exemption code: 03 If exemption code is 01 or 09, enter citation or docket number:		
<b>Computation of Tax - Enter consideration for conveyance on the appropriate line. See Instructions.</b>		
► 15. Consideration for unimproved land	x 0.0075 =	0.00
► 16. Total consideration for residential dwelling	x 0.0075 =	0.00
► 16a. Portion of Line 16 that is \$800,000 or less	x 0.0075 =	0.00
► 16b. Portion of Line 16 that exceeds \$800,000	0.00 x 0.0125 =	0.00
► 17. Residential property other than residential dwelling	x 0.0075 =	0.00
► 18. Nonresidential property other than unimproved land	x 0.0125 =	0.00
► 19. Property conveyed by a delinquent mortgagor	x 0.0075 =	0.00
► 20. Total State of Connecticut tax due: Add Lines 15, 16a through 19.		0.00

**Declaration:** I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return to the Department of Revenue Services (DRS) is a fine of not more than \$5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

Indicate who is signing this return:

Grantor

Name of person signing the return (type or print)

THOMAS B. LYNCH

Name of grantor's representative (type or print)

LYNCH, TREMBICKI, BOYNTON

Grantor's attorney

Signature

Grantor's authorized agent

Date

10/4/2022

Telephone number

► 34874

203 878-4669

Connecticut Juris number if applicable

## Town Clerk Copy

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(Rev. 04/17)

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Amended return

1. Town 2. Location of property conveyed (number and street)

LEDYARD

334 COLONEL LEDYARD HIGHWAY

3. Are there more than two grantors/sellers? Yes

4. Grantor/seller #1 (last name, first name, middle initial)

EASTCONN PROPERTIES, LLC

Grantor/seller address (street and number) after conveyance  
680 BOSTON POST ROAD

City/town  
MILFORD

State ZIP code  
CT 06460

5. Grantor/seller #2 (last name, first name, middle initial)

Grantor/seller address (street and number) after conveyance

City/town

State ZIP code

6. Is the grantor a partnership, S corporation, LLC, estate, or trust?  Yes 7. Was more than one deed filed with this conveyance? Yes

8. If this conveyance is for no consideration or less than adequate consideration, which gift tax returns will be filed? Federal only State only Both fed. & state  None

9. Is there more than one grantee/buyer or, is the grantee a partnership, S corporation, LLC, estate, or trust? Yes

10. Grantee/buyer (last name, first name, middle initial)

TOWN OF LEDYARD

Grantee/buyer address (street and number) after conveyance  
741 COLONEL LEDYARD HIGHWAY

City/town  
LEDYARD

State ZIP code  
CT 06339

11. Date conveyed (MM - DD - YYYY) 12. Date recorded (MM - DD - YYYY) 13. Type of instrument:

10 - 4 - 2022

10 - - -

Warranty  Quitclaim

Easement

Other

14. The grantor claims no tax is due because (See instructions.): Conveyance was for no consideration or consideration was less than \$2,000.

Conveyance is exempt under Conn. Gen. Stat. §12-498. Enter exemption code: 03

If exemption code is 01 or 09, enter citation or docket number:

**Computation of Tax - Enter consideration for conveyance on the appropriate line. See Instructions.**

15. Consideration for unimproved land		$\times 0.0075 =$	0.00
16. Total consideration for residential dwelling		$\times 0.0075 =$	0.00
16a. Portion of Line 16 that is \$800,000 or less		$\times 0.0075 =$	0.00
16b. Portion of Line 16 that exceeds \$800,000	0.00	$\times 0.0125 =$	0.00
17. Residential property other than residential dwelling		$\times 0.0075 =$	0.00
18. Nonresidential property other than unimproved land		$\times 0.0125 =$	0.00
19. Property conveyed by a delinquent mortgagor		$\times 0.0075 =$	0.00
20. Total State of Connecticut tax due: Add Lines 15, 16a through 19.			0.00



**OP-236 Schedule A - Grantors**  
Supplemental Information for Connecticut  
Real Estate Conveyance Tax Return  
(Rev. 10/16)

Use OP-236 Schedule A to provide the required information if there are additional grantors/sellers. If the grantor is a partnership, S corporation, limited liability company (LLC), estate, or trust, enter the name, address, and taxpayer identification number of the partners, shareholders, members, or beneficiaries. If a partner, shareholder, member or beneficiary of the grantor is an LLC or a qualified subchapter S corporation (QSS), enter the name of such entity, its address and tax identification number. Do **not** combine grantors/sellers and grantee/buyers on the same schedule.

Town <b>Ledyard</b>	Was the transaction completed on one deed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date conveyed <b>10 / 4 / 2022</b> <small>mm dd yy</small>
Location of property conveyed <b>334 Colonel Ledyard Highway</b>		Date recorded <b>  /   /  </b> <small>mm dd yy</small>
Name of grantor as shown on the deed <b>Eastconn Properties, LLC</b>		

Last name, first name, middle initial <b>Roballey, Ralph</b>	Taxpayer identification number <b>049-28-1158</b> <input type="checkbox"/> SSN <input type="checkbox"/> FEIN		
Address after conveyance <b>680 Boston Post Road</b>	City or town <b>Milford</b>	State <b>CT</b>	ZIP code <b>06460</b>
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN		
Address after conveyance	City or town	State	ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN		
Address after conveyance	City or town	State	ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN		
Address after conveyance	City or town	State	ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN		
Address after conveyance	City or town	State	ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN		
Address after conveyance	City or town	State	ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN		
Address after conveyance	City or town	State	ZIP code