Form REW-5 2025

Request for Exemption or Reduction in Withholding of Maine Income Tax on the Disposition of Maine Real Property



V	File Form REW-5 online at <u>revenue.maine.gov</u> .					
Not	ote: This form is for sales occurring in 2025; submissions filed on a prior year form may be subject to delay. This form must be submitted at least 5 business days before the closing date. If mailed, please allow an additional 2 to 3 weeks for processing.					
	Applicant's last name (or name of entity) Applic	cant's first name (if applica	ble)	SSN or feder	al EIN	
	Applicant spouse's last name (if applicable) Spous	cant spouse's last name (if applicable) Spouse's first name		Spouse's SSN		
	Applicant's mailing address (number and street)	City/Town		State	Zip Code	
	Applicant's email address Applic		oplicant's da	ant's daytime phone number		
	Check here if applicant is a corporation required to file Form 1120ME					
. Applicant's percentage of ownership. (If less than 100.00%, line 1a must be completed.)1. %						
la.	Name(s) of all other sellers (if applicable)					
2.						
	Buyer(s) name(s)					
3.	Physical address of property	Municipality/Town	ship	Clos	sing date	
Date and method of acquisition. Enter the date the applicant originally acquired the property and check the box that indicates the applicant's method of acquisition. Additional documentation may be requested to verify the original acquisition. See instructions.						
1.	Date of acquisition or date of decedent's death. See instructions4.					
	Method of acquisition: a) Purchase (check one)					
	b) Inheritance: (Decedent's na	ame		SSN)
	c) Gift or other			20.1		
d) Like-kind exchange						
6.	Original purchase price/basis. See instructions		6. \$.00
7.	Applicant's allowable closing costs from original purchase of property. See instructions		7. \$.00
3.	Capital improvements. See instructions		8. \$.00
9.	Add lines 6, 7, and 8		9. \$.00
I0a	Length of time during the applicant's ownership that the proper commercial use. If there was no rental/commercial use, continu		10a.	years	mo	nths
10b	. Allowed or allowable accumulated depreciation. See instructi	ons	10b. \$.00

Firm or company name

City/Town

Email address

Representative name (and title, if applicable)

Country (if not United States)

Representative's mailing address (number and street)

Zip Code

State

Telephone number