OFFICE OF THE ALBANY COUNTY CLERK
CLERK OF SUPREME AND COUNTY COURTS
32 NORTH RUSSELL ROAD, ALBANY NY 12206-1324

THOMAS G. CLINGAN
ALBANY COUNTY CLERK

LYNN M. VAILLANCOURT
GERALDINE M. GOULD
FIRST DEPUTY COUNTY CLERKS

MARLENE J. DION
SHERLYN CHAPMAN
DEBORAH KRUZINSKI
DEPUTY COUNTY CLERKS

REQUEST TO RETRIEVE UNRETURNED ORIGINAL DOCUMENT (SUBMITTED WITHOUT SELF-ADDRESSED STAMPED ENVELOPE)

Documents recorded on or after September 1, 2009, at the Albany County Clerk's office must be accompanied by a self-addressed, stamped envelope ("SASE") for the return of the original document(s.) Any original document submitted without a SASE will be kept for the legal retention period and then disposed of as provided in law. Any document submitter who did not provide a SASE may submit this form together with a check payable to "Albany County Clerk" in the amount of $1 for each document, to cover the cost of postage and handling. Documents will be retrieved from storage in the Hall of Records and mailed to the address provided below.

Printed name: ________________________________ Date:______________

Address to mail original document to me at this address: ______________________

____

Telephone number (if further info needed): ______________________________

Document type (deed, mortgage, satisfaction, etc.): __________________________

Note (optional): ____

____

- -

DO NOT WRITE BELOW THIS LINE.

Location: ☐ Deed books ☐ Mortgage books ☐ Miscellaneous books

Inv. Control #______________ Book _____ Page _____ Recording date__________

Rec'd at Clerk's office by _______________ on (date) ______________________

Mailed back by ____________________ on (date) _________________________

SASE-1 1/2011

(518) 487-5100 FAX (518) 487-5099
www.albanycounty.com/clerk