



John H. Zurlo, County Clerk
137 Margaret St
Ste 101
Plattsburgh, NY 12901-2966
(518) 565-4700

Clinton County Clerk Recording Cover Sheet

Received From :
NILES & BRACY PLLC
46-48 CORNELIA ST
PO BOX 2729
PLATTSBURGH, NY 12901

Return To :
NILES & BRACY PLLC
46-48 CORNELIA ST
PO BOX 2729
PLATTSBURGH, NY 12901

First 1ST PARTY(---OR)

DEFAYETTE, CAROL S

First 2ND PARTY(--EE)

GILES, DANIEL T

Instr Number : 2021-00317437

Index Type : Land Records

Type of Transaction : Deed - (Other Property)

Recording Fee : \$326.00

Recording Pages : 6

The Property affected by this instrument is situated in Plattsburgh (Town),
in the County of Clinton, New York

Real Estate Transfer Tax

RETT # : 2553

Deed Amount : \$50,000.00

RETT Amount : \$200.00

Total Fees : \$526.00

State of New York

County of Clinton

I hereby certify that the within and foregoing was
recorded in the Clerk's office for Clinton County,
New York

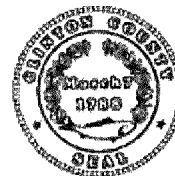
On (Recorded Date) : 07/14/2021

At (Recorded Time) : 3:34:00 PM



Doc ID - 009363690006


John H. Zurlo, County Clerk



This sheet constitutes the Clerks endorsement required by Section 319 of Real Property Law of the State of New York

Entered By: RACHELLE Printed On : 07/14/2021

File Number: 2021-00317437 Seq: 1

WARRANTY DEED

THIS INDENTURE

Made the 8 day of July, Two Thousand Twenty-One

Between CAROL S. DEFAYETTE, residing at 2072 Military Turnpike, Plattsburgh, New York 12901,

Party of the first part; and

DANIEL T. GILES, CONSTANCE L. GILES and GARY N. GILES, residing at 2112 Military Turnpike, Plattsburgh, New York 12901, as joint tenants with right of survivorship,

Parties of the second part.

Witnesseth that the party of the first part, in consideration of ONE and No/100 Dollar (\$---1.00---) and other good and valuable consideration, lawful money of the United States, paid by the parties of the second part, does hereby grant and release unto the parties of the second part, their heirs, successors and assigns forever **ALL THAT CERTAIN PIECE OR PARCEL OF LAND** as more particularly described in "Schedule A" attached hereto and made a part hereof.

Together with the appurtenances and all the estate and the rights of the party of the first part in and to said premises.

To have and to hold the premises herein granted unto the parties of the second part, their heirs, successors and assigns forever.

And said party of the first part covenants as follows:

First, That the parties of the second part shall quietly enjoy the said premises;

Second, That said party of the first part will forever Warrant the title to said premises;

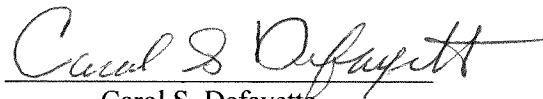
Third, That, in Compliance with Sec. 13 of the Lien Law, the party of the first part will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose.

The word "party" shall be construed as if it read "parties" whenever the sense of this indenture so requires.

In Witness Whereof, the party of the first part has duly executed this Instrument on the date and year

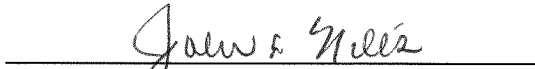
first above written.

In presence of


Carol S. Defayette

STATE OF NEW YORK)
) SS.:
COUNTY OF CLINTON)

On this 8 day of July, 2021 before me, the undersigned, a Notary Public in and for said State, personally appeared CAROL S. DEFAYETTE, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her capacity, and that by her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.


Notary Public

JOHN F. NILES
Notary Public, State of New York
No. 02NI4517976
Qualified in Clinton County
Commission Expires 4/30/22

SCHEDULE "A"

ALL THAT CERTAIN PIECE OR PARCEL OF LAND situate, lying and being on the easterly side of Military Turnpike in the Town of Plattsburgh, County of Clinton and State of New York which premises are shown as Lot "2a" and Lot "2b" to be merged into Lot "2" (15.2 acres $\pm$), which premises are shown and described on a survey map entitled "Defayette Subdivision 2021, East Side of Military Turnpike, Town of Plattsburgh, Clinton County, New York", dated April 26, 2021 and revised on May 25, 2021 which survey was completed by Gregg N. Pawlowski, L. S., license number 50862 and which map was filed in the Clinton County Clerk's Office on June 9, 2021 as Map Instrument No. 2021-316517.

The premises are more particularly described as follows:

BEGINNING at an iron pipe found in the easterly bounds of Military Turnpike (aka N.Y.S. Route 190) at the southwest corner of lands now or formerly of David L. Defayette and Carol S. Defayette (Instrument No. 2013-257987);

Thence N $85^{\circ} 30' 08''$ E a distance of 299.92 feet to an iron pipe found at the northeast corner of lands now or formerly of Daniel T. Giles (Deed Instrument No. 2018-295792);

Thence S $01^{\circ} 36' 29''$ E a distance of 199.89 feet to a survey monument found;

Thence turning and running N $85^{\circ} 25' 40''$ Ea distance of 147.61 feet to a survey monument to be set;

Thence turning and running S $00^{\circ} 04' 54''$ W a distance of 207.15 feet to a point marked by a survey monument to be set;

Thence N $87^{\circ} 45' 27''$ E a distance of 574.59 feet to a point marked by a survey monument to be set;

Thence turning and running N $02^{\circ} 15' 10''$ W a distance of 410.43 feet to a point marked by a survey monument to be set;

Thence continuing N $03^{\circ} 14' 14''$ W a distance of 98.48 feet to a point marked by a survey monument to be set;

Thence continuing N $03^{\circ} 14' 14''$ W a distance of 311.89 feet to a point marked by a survey monument found;

Thence turning and running N $79^{\circ} 58' 18''$ W a distance of 563.61 feet to a point and continuing N $79^{\circ} 42' 32''$ W a distance of 268.21 feet to a point marked by the northeasterly corner of premises now or formerly titled to James E. Stewart and Kim V. Stewart (Vol. 118 of Deeds at Page 226);

Thence turning and running S 08° 48' 48" E a distance of 100 feet along the easterly bounds of the Stewart premises to a point marked by the southeasterly corner of the Stewart premises;

Thence turning and running N 78° 47' 12" W a distance of 200 feet along the southerly bounds of the Stewart premises to a point located in the easterly bounds of the Military Turnpike;

Thence turning and running along the easterly bounds of Military Turnpike S 08° 52' 45" W a distance of 56.62 feet, S 10° 13' 05" W a distance of 113.35 feet and S 11° 37' 16" W a distance of 148.34 feet to the point or place of beginning.

Hereby intending to merge Lots "2a" and "2b" into Lot "2" as shown on the aforementioned survey map.

BEING THE SAME PREMISES conveyed by David L. Defayette to David L. Defayette and Carol S. Defayette by deed dated July 2, 2013 and recorded in the Clinton County Clerk's Office on July 11, 2013 under Instrument No. 2013-00257987. ALSO BEING PART OF THOSE PREMISES conveyed by Henry R. Defayette to David L. Defayette and Carol S. Defayette by deed dated October 31, 1990 and recorded in the Clinton County Clerk's Office on November 1, 1990 in Vol. 807 of Deeds at Page 186.

David L. Defayette died a resident of the County of Clinton, State of New York on December 11, 2020.

NEW YORK STATE
DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

131-2020-00110238

STATE FILE NUMBER

RECORDED DISTRICT 0901		REGISTER NUMBER 546	
1. NAME: FIRST David Louis Defayette		MIDDLE LAST	
2. SEX: MALE ☒ FEMALE ☐		3A. DATE OF DEATH: MONTH 12 DAY 11 YEAR 2020	
3B. HOUR: 09:42 AM		4B. IF FACILITY, DATE ADMITTED: MONTH 11 DAY 11 YEAR 2020	
4A. PLACE OF DEATH: (Check one) HOSPITAL DOA ☐ ER ☐ HOSPITAL OUTPATIENT ☐ HOSPITAL INPATIENT ☒ NURSING HOME ☐ PRIVATE RESIDENCE ☐ HOSPICE FACILITY ☐ OTHER (Specify): ☐		4C. NAME OF FACILITY: (If not facility, give address) Champlain Valley Physicians Hospital Medical Ctr	
4D. LOCALITY: (Check one and specify) CITY ☐ VILLAGE ☐ TOWN ☐ Plattsburgh		4E. COUNTY OF DEATH: Clinton	
4F. MEDICAL RECORD NO. 033848		4G. WAS DECEDENT TRANSFERRED FROM ANOTHER INSTITUTION? (If yes, specify institution name, city or town, county and state) NO ☒ YES ☐	
5. DATE OF BIRTH: MONTH 05 DAY 28 YEAR 1940		6A. AGE IN YEARS: 80	
6B. IF UNDER 1 YEAR ENTER: months days		6C. IF UNDER 1 DAY ENTER: hours minutes	
7A. CITY AND STATE OF BIRTH: (If not USA, Country and Region/Province) Plattsburgh, New York		7B. IF AGE UNDER 1 YEAR, NAME OF HOSPITAL OF BIRTH:	
8. SERVED IN U.S. ARMED FORCES? (Specify years) NO ☐ YES ☒ 1959-1963		9. DECEDENT OF HISPANIC ORIGIN? Check the boxes that best describe whether the decedent is Spanish/Hispanic/Latino. A ☒ No, not Spanish/Hispanic/Latino B ☐ Yes, Mexican, Mexican American, Chicano C ☐ Yes, Puerto Rican D ☐ Yes, Cuban E ☐ Yes, Other Spanish/Hispanic/Latino (Specify)	
10. DECEDENT'S RACE: Check one or more races to indicate what the decedent considered himself or herself to be: A ☒ White/Caucasian B ☐ Black or African American C ☐ Asian Indian D ☐ Chinese E ☐ Filipino F ☐ Japanese G ☐ Korean H ☐ Vietnamese J ☐ Native Hawaiian K ☐ Guamanian or Chamorro M ☐ Samoan N ☐ American Indian or Alaska Native (specify) P ☐ Other Asian (specify) R ☐ Other Pacific Islander (specify) S ☐ Other (specify)		11. DECEDENT'S EDUCATION: Check the box that best describes the highest degree or level of school completed at the time of death. 1 ☐ ≤ 8th grade 2 ☐ 9th-12th grade; no diploma 3 ☒ High school graduate or GED 4 ☐ Some college credit, but no degree 5 ☐ Associate's degree 6 ☐ Bachelor's degree 7 ☐ Master's degree 8 ☐ Doctorate/Professional degree	
12. SOCIAL SECURITY NUMBER:		13. MARITAL STATUS: NEVER MARRIED ☐ 1 MARRIED ☒ 2 WIDOWED ☐ 3 DIVORCED ☐ 4 SEPARATED ☐ 5	
14. SURVIVING SPOUSE: Enter birth name of spouse If married or separated, Carol Rabideau		15A. USUAL OCCUPATION: (Do not enter retired) Residential and General Contractor	
15B. KIND OF BUSINESS OR INDUSTRY: Construction		15C. NAME AND LOCALITY OF COMPANY OR FIRM: Defayette Construction, Plattsburgh, NY	
16A. RESIDENCE: (State or Country if not USA) NY		16B. County or Region/Province Clinton	
16C. LOCALITY: (Check one and specify) CITY ☐ VILLAGE ☐ TOWN ☐ Plattsburgh Town		16F. IF CITY OR VILLAGE, IS RESIDENCE WITHIN CITY OR VILLAGE LIMITS? ☐ YES ☐ NO IF NO, SPECIFY TOWN:	
16D. STREET AND NUMBER OF RESIDENCE: 2072 Military Turnpike		16E. ZIP CODE: 12901	
17. BIRTH NAME OF FATHER / PARENT: FIRST MI LAST Henry Defayette		18. BIRTH NAME OF MOTHER / PARENT: FIRST MI LAST Elaine Gonyea	
19A. NAME OF INFORMANT: Carol Defayette		19B. MAILING ADDRESS: (include zip code) 2072 Military Turnpike, Plattsburgh, NY 12901	
20A. 1 ☒ BURIAL 2 ☐ CREMATION 3 ☐ REMOVAL 4 ☐ HOLD 5 ☐ DONATION MONTH DAY YEAR 6 ☐ ENTOMBMENT 12 14 2020		20B. PLACE OF BURIAL, CREMATION, REMOVAL OR OTHER DISPOSITION: St. Peter's Cemetery	
20C. LOCATION: (City or town and state) Plattsburgh, New York		21A. NAME AND ADDRESS OF FUNERAL HOME: R W Walker Funeral Home	
21B. REGISTRATION NUMBER: 01422		21C. NAME OF FUNERAL DIRECTOR: Trevor D Rabideau	
21D. SIGNATURE OF FUNERAL DIRECTOR: Trevor D Rabideau Electronically Signed		21E. REGISTRATION NUMBER: 12976	
23A. SIGNATURE OF REGISTRAR: Sylvia G Parrotte Electronically Signed		23B. DATE FILED: MONTH 12 DAY 14 YEAR 2020	
24A. BURIAL OR REMOVAL PERMIT ISSUED BY: Jill Borrie		24B. DATE ISSUED: MONTH 12 DAY 14 YEAR 2020	
ITEMS 25 THRU 33 COMPLETED BY CERTIFYING PHYSICIAN -- OR -- CORONER/CORONER'S PHYSICIAN OR MEDICAL EXAMINER			
25A. CERTIFICATION: To the best of my knowledge, death occurred at the time, date and place and due to the causes stated. Certifier's Name: Brian David Henry, MD License No.: 280443 Signature: Brian David Henry, MD Month Day Year 12 14 2020			
25B. If coroner is not a physician, enter Coroner's Physician's name & title: License No.: Signature: Month Day Year			
25C. If certifier is not attending physician, enter Attending Physician's name & title: License No.: Address: Month Day Year			
26A. Attending physician attended deceased: FROM Month Day Year 11 11 2020 TO Month Day Year 12 11 2020			
26B. Deceased last seen alive by attending physician: Month Day Year 12 11 2020			
26C. Pronounced Dead ON Month Day Year 12 11 2020 AT 09:42 AM			
27. MANNER OF DEATH: NATURAL CAUSE ☒ 1 ACCIDENT ☐ 2 HOMICIDE ☐ 3 SUICIDE ☐ 4 UNDETERMINED CIRCUMSTANCES ☐ 5 PENDING INVESTIGATION ☐ 6			
28. WAS CASE REFERRED TO CORONER OR MEDICAL EXAMINER? 0 ☒ NO 1 ☐ YES			
29A. AUTOPSY? NO ☒ 0 YES ☐ 1 REFUSED ☐ 2			
29B. IF YES, WERE FINDINGS USED TO DETERMINE CAUSE OF DEATH? 0 ☐ NO 1 ☐ YES			
CONFIDENTIAL SEE INSTRUCTION SHEET FOR COMPLETING CAUSE OF DEATH CONFIDENTIAL			
30. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), AND (C).) PART I IMMEDIATE CAUSE: DUE TO OR AS A CONSEQUENCE OF: (B) DUE TO OR AS A CONSEQUENCE OF: (C) PART II OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (A): 31A. IF INJURY, DATE: MONTH DAY YEAR HOUR: 31B. INJURY LOCALITY: (City or town and county and state) 31C. DESCRIBE HOW INJURY OCCURRED: 31D. PLACE OF INJURY: 31E. INJURY AT WORK? NO YES ☐ 0 ☐ 1			
32. WAS DECEDENT HOSPITALIZED IN LAST 2 MONTHS? NO YES ☒ 1			
33A. IF FEMALE: 0 ☐ Not pregnant within last year 1 ☐ Pregnant at time of death 2 ☐ Not pregnant, but pregnant 43 days to 1 year before death 3 ☐ Unknown if pregnant within past year			
33B. DATE OF DELIVERY: MONTH DAY YEAR 01 01 2021			

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