

APN:

R.P.P.T. Exempt:
When recorded, return to:
c/o White Law Chartered
335 W. First St.
Reno, NV 89503
Mail Tax Statements to Grantees:

SPACE ABOVE FOR RECORDER'S USE

DEATH OF GRANTOR AFFIDAVIT

..... (here insert name of affiant), being duly sworn, deposes and says that..... (here insert name of deceased), the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as..... (here insert name of grantor), named as the grantor or as one of the grantors in the deed upon death recorded on..... (date), as document or file number....., book....., at page....., records of..... County, Nevada, covering the real property commonly known as....., City of....., County of....., State of Nevada, and more particularly described as: (Legal Description) (here insert name of affiant) is the beneficiary or at least one of the beneficiaries to whom the real property is conveyed upon the death of the grantor..... (here insert name of deceased) or is the authorized representative of the beneficiary or at least one of the beneficiaries. The beneficiary or beneficiaries listed in the deed upon death are.....

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING CONTAINS A SOCIAL SECURITY NUMBER OF A PERSON OR PERSONS.

Date

name

State of }
 }ss.
County of }

Subscribed and sworn to on this day of, in the year, before me, (here insert name of notary public), by (here insert name of principal).

On thisday of, in the year, before me personally appeared (here insert name of principal) personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument, and acknowledged that he or she executed it.

_____ (Signature of Notary Public)

NOTARY SEAL