

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:

NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, STATE & ZIP CODE \_\_\_\_\_

TITLE ORDER NO \_\_\_\_\_ ESCROW NO \_\_\_\_\_

SPACE ABOVE THIS LINE FOR RECORDER'S USE

# GRANT DEED

<p>DOCUMENTARY TRANSFER TAX \$ _____</p> <p><input type="checkbox"/> computed on full value of property conveyed, or</p> <p><input type="checkbox"/> computed on full value less liens and encumbrances remaining at time of sale.</p> <p>_____ Signature of Declarant or Agent Determining Tax      Firm Name</p>
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FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, I (We), \_\_\_\_\_  
NAME OF GRANTOR(S)

grant to \_\_\_\_\_  
NAME OF GRANTEE(S)

all that real property situated in the City of \_\_\_\_\_ (or in an unincorporated area of)

\_\_\_\_\_ County, \_\_\_\_\_ described as follows (insert legal description):

NAME OF COUNTY

STATE

Assessor's parcel No. \_\_\_\_\_

Executed on \_\_\_\_\_, at \_\_\_\_\_  
CITY AND STATE

STATE OF \_\_\_\_\_

SIGNATURE

COUNTY OF \_\_\_\_\_

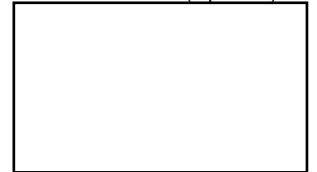
SIGNATURE

On \_\_\_\_\_ before me, \_\_\_\_\_, a Notary Public,

personally appeared who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

**RIGHT THUMBPRINT (Optional)**



**CAPACITY CLAIMED BY SIGNER(S)**

- INDIVIDUAL(S) \_\_\_\_\_
- CORPORATE \_\_\_\_\_
- OFFICER(S) \_\_\_\_\_

- PARTNER(S) (TITLES)
- LIMITED
- GENERAL

- ATTORNEY IN FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER: \_\_\_\_\_

SIGNATURE OF NOTARY

(SEAL)

MAIL TAX STATEMENTS TO : \_\_\_\_\_

**SIGNER IS REPRESENTING:**

Name of Person(s) or Entity(ies)

\_\_\_\_\_  
\_\_\_\_\_