**Affidavit of Death Form for Property**

**State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

BEFORE ME, the undersigned authority, on this day personally appeared **[Your Name]**, who, being by me duly sworn, upon oath deposed and stated as follows:

1. **Declarant Information:**I, **[Your Full Name]**, residing at **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, with contact information **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, hereby declare under oath that I have personal knowledge of the matters set forth in this affidavit.
2. **Details of Deceased:**Name of the deceased: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date of death: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Place of death: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Property Information:**The deceased owned property located at:
Address: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Legal description (if applicable): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **Relationship to the Deceased:**I am the **[relation to deceased, e.g., spouse, child, executor, etc.]** of the deceased.
5. **Ownership Information:**To the best of my knowledge, the deceased held sole ownership of the above-mentioned property.
☐ Yes
☐ No
6. **Supporting Documents Attached:**I have attached the following documents to support this affidavit:
☐ Death certificate
☐ Property deed
☐ Will or trust documents
☐ Other: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
7. **Declaration:**I solemnly declare that the information contained in this affidavit is true and correct to the best of my knowledge and belief.

**Signature of Declarant:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Notary Public:**Subscribed and sworn before me this **\_\_\_\_\_\_\_\_\_\_** day of **\_\_\_\_\_\_\_\_\_\_\_\_**, 20\_\_\_\_\_\_.
Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Seal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_