

Quit Claim Property Deed Form

Grantor Information

Full Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number: _____

Email Address: _____

Grantee Information

Full Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number: _____

Email Address: _____

Property Description

Property Address: _____

Legal Description: _____

Parcel Number (if applicable): _____

Transfer Details

I, the Grantor, hereby transfer all my rights, title, and interest in the property described above to the Grantee without any warranties or guarantees of title.

Transfer Purpose: _____

Acknowledgment

The Grantor certifies that this transfer is made voluntarily and that all necessary information has been disclosed.

Signatures

Grantor Name: _____

Signature: _____

Date: _____

Grantee Name: _____

Signature: _____

Date: _____

Notary Section

Notary Name: _____

Signature: _____

Date: _____

Notary Seal: _____