**California Deed of Trust Form PDF**

**THIS DEED OF TRUST** is made on **\_\_\_\_\_\_ [Date]**, between **\_\_\_\_\_\_ [Grantor's Name]**, residing at **\_\_\_\_\_\_ [Address]**, hereinafter called the **"Trustor"**, and **\_\_\_\_\_\_ [Trustee’s Name]**, residing at **\_\_\_\_\_\_ [Address]**, hereinafter called the **"Trustee"**, for the benefit of **\_\_\_\_\_\_ [Beneficiary's Name]**, residing at **\_\_\_\_\_\_ [Address]**, hereinafter called the **"Beneficiary."**

#### **Property Description**

The property secured under this Deed of Trust is located at:  
**Property Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Legal Description**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### **Granting Clause**

For value received, the **Trustor** hereby **grants, transfers, and assigns** to the **Trustee**, in trust for the **Beneficiary**, the property described above to secure the payment of the following obligations:

1. **Loan Amount**: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Interest Rate**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% per annum
3. **Maturity Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Month/Day/Year]

#### **Trustor's Covenants**

The **Trustor** agrees:

* To **maintain the property** in good condition.
* To **pay all property taxes** and assessments when due.
* To **carry adequate insurance** on the property.

#### **Events of Default**

If the **Trustor** fails to comply with the terms, the **Beneficiary** may declare a default and initiate foreclosure proceedings.

#### **Signatures**

**Trustor's Name & Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Trustee's Name & Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Beneficiary's Name & Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date of Execution**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_