
THE SPACE ABOVE IS RESERVED FOR THE COUNTY RECORDER'S OFFICE

PREPARED BY

Name _____

Address _____

County _____ State _____ Zip _____

SEND TAX NOTICE TO

Name _____

Address _____

County _____ State _____ Zip _____

AFTER RECORDING RETURN TO

Name _____

Address _____

County _____ State _____ Zip _____

STATE OF VERMONT

COUNTY

DATE PREPARED

VERMONT GENERAL WARRANTY DEED

This general warranty deed, which is entered into and made effective on this __ day of _____ 20__ (effective date) between _____ (name of grantor) a _____ (marital status or type of organization), residing or situated at _____ (full address)

_____	_____	_____
Signature of Grantee	Date	Name of Grantee
_____	_____	_____
Signature of Grantee (indicate if spouse)	Date	Name of Grantee

We, serving as witnesses, each declare that the Grantor(s) and Grantee(s) signed and executed this instrument in our presence. The Grantee(s) and Grantor(s) signed it in their right state of mind, to our knowledge is eighteen years of age or older, and willingly signed without undue pressure, influence, or duress. We each sign this quitclaim deed as witnesses at the request of the Grantor(s) while the Grantor(s) is present.

_____	_____
Witness's Signature	Witness's Name

Address

_____	_____
Witness's Signature	Witness's Name

Address

RELEASE OF DOWER

(If spouse is not a Grantor)

In consideration of the sum paid above and other good and valuable consideration, to it in hand paid by Grantee, the receipt whereof is hereby acknowledged, I, _____, of _____, _____, _____, spouse of _____, do hereby waive and release all homestead, dower, curtesy, community property and any other rights, title or interest in the above Property.

Spouse's signature

Notary Acknowledgement

State of _____

County of _____

On _____, 20____ before me, _____ (name and title of officer), personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose names are subscribed within the instrument and acknowledged to me that they executed the same in their authorized capacity(ies), and that by 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 _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____

(Seal)

Print Name _____