

This space is reserved for tax certification

This space is reserved for Recorder's use

Minnesota Quitclaim Deed

- Total consideration for the value of this property is \$3,000.00 or less. **-OR-**
 eCRV Number: _____ Deed Tax Due: \$ _____

KNOW ALL MEN BY THESE PRESENTS, that for and in consideration of the sum of _____ US Dollars (\$ _____) in hand, paid to _____, with an address of _____

(the "Grantor" or "Grantors"), does/do hereby remise, release, and forever quit claim to _____, with an address of _____

(the "Grantee" or Grantees") all the rights, title, interest, and claim in or to the following described real estate, situated in _____ County, Minnesota, to wit:

A complete legal description of the real property being conveyed by this instrument is attached hereto on page 4 as EXHIBIT A.

Tax Parcel ID Number _____

Well Disclosure

- The Grantor certifies that they are unaware of any wells on the property
- A Well Disclosure Certificate, WDC Number _____, has either been electronically filed or is attached to this document
- The Grantor certifies that the status and number of wells on the property have not changed since the previous Well Disclosure Certificate was filed



Until amended, tax information shall be sent to:

Name: _____

Address: _____

This instrument was prepared by:

Name: _____

Address: _____

After recording, return to:

Name: _____

Address: _____

TO HAVE AND TO HOLD, all and singular the described property, together with the tenements, hereditaments, and appurtenances belonging, or in anywise appertaining thereto, unto the Grantee(s), and their heirs and assigns forever.

IN WITNESS WHEREOF, the Grantor(s) has/have duly executed this Quitclaim Deed as of the date hereinunder.

Grantor Signature: _____ Date: _____

Printed Name: _____

Grantor Signature: _____ Date: _____

Printed Name: _____

NOTARY ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Minnesota)
County of _____)

On _____ before me, _____ ,
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 Minnesota that the foregoing
paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____

Printed Name _____

My Commission Expires _____

(Seal)

EXHIBIT A

Legal description of the real property being conveyed by this instrument.