|  |  |
| --- | --- |
| **After recording, return to:** |  |
|  |  |
|  |  |
|  | *This space reserved for use by the County Recording Office.* |

**West Virginia Transfer on Death Deed**

|  |  |  |
| --- | --- | --- |
| I/we, | , | (Owner/Grantor), |
| being of sound mind and legal capacity, hereby convey, effective upon my death, the following real property located in West Virginia: | | |

**A complete legal description of the real property being conveyed by this instrument is attached hereto on page 3 as EXHIBIT A.**

I designate the following beneficiary:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Relationship: |  |
| Address: |  |  |  |

If the beneficiary does not survive me, I designate the following alternate beneficiary:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Relationship: |  |
| Address: |  |  |  |

I reserve the right to revoke or change this transfer on death deed at any time, and the transfer to the designated beneficiary shall not occur until my death.

|  |  |  |  |
| --- | --- | --- | --- |
| Grantor Signature: |  | Date: |  |
| Printed Name: |  |  |  |
| Grantor Signature: |  | Date: |  |
| Printed Name: |  |  |  |

|  |  |
| --- | --- |
| This instrument was prepared by: |  |
|  |  |
|  |  |

**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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ }

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ }

On \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert name and title of the officer), personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (seller’s name) who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed within the Transfer on Death Deed and acknowledged to me that they executed the same in their authorized capacity, and that by their signature on the instrument the person, or the entity upon behalf of which the person 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.

Notary Public: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/)

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_

(seal)

EXHIBIT A

Legal Description