

STATE OF NEBRASKA)
)
COUNTY OF _____)
(county in which the document will be signed)

Affidavit for Transfer of Real Property without Probate

I, _____, under penalty of perjury (Nebraska Revised Statute § 28-915),
(your name)
affirm the following to be true:

1. Thirty days have passed since the death of _____ and I have attached
(deceased's name)
to this affidavit a certified or authenticated copy of the death certificate;
2. The deceased is the sole owner of the real property described as _____

_____;
3. Based on the assessed value of the real property through the County Assessor/Register of Deeds in the year of death, less real estate taxes and interest on the real estate taxes if any is due at the time of death, the value of all the real property in Nebraska belonging to the deceased is \$50,000.00 or less and the value of the entire estate (real property value *plus* personal property value) is \$ _____;
4. There is no Personal Representative, application for Personal Representative, or petition for Personal Representative either pending or granted in another court;
5. I am the _____ of the deceased and am entitled to the real
(your relationship to the deceased)
property by reason of the homestead allowance, exempt property allowance, family allowance, or by intestate succession pursuant to Nebraska Probate Code §30-24,129

OR
 I am entitled to the real property per the will of the deceased and I have made an investigation and have been unable to determine any subsequent will;
6. No other person has a right to the real property;
7. I will file this affidavit with the Register of Deeds Office of the county in which the real property is located (_____ County); and
8. I will file the affidavit and certified or authenticated copy of the death certificate in any other county in Nebraska in which the deceased owns real property that is subject to this affidavit.

Date

Signature

(do NOT sign UNTIL A NOTARY IS PRESENT AND WITNESSES YOU SIGNING)

Address (line 1)

Address (line 2)

Attachment: certified or authenticated copy of Death Certificate

NOTARY

State of Nebraska, County of _____

This document was acknowledged before me on the _____ day of _____, 20_____,
(day) (month) (year)

by _____
(name of Affiant)

Signature of Notary (Seal, if any)

My commission expires: _____