

**REVOCABLE TRANSFER ON DEATH (TOD) DEED**

**NOTICE TO OWNER: THIS DEED MUST BE RECORDED BEFORE YOUR DEATH OR IT WILL NOT BE EFFECTIVE. YOU SHOULD CAREFULLY READ ALL INFORMATION ON THE OTHER SIDE OF THIS FORM. YOU MAY WANT TO CONSULT A LAWYER BEFORE USING THIS FORM.**

**IDENTIFYING INFORMATION**

**OWNER OR OWNERS MAKING THIS DEED:**

\_\_\_\_\_  
Printed Name and Mailing Address

\_\_\_\_\_  
Printed Name and Mailing Address

**LEGAL DESCRIPTION OF THE PROPERTY:**

**PRIMARY BENEFICIARY**

**I DESIGNATE THE FOLLOWING BENEFICIARY IF THE BENEFICIARY SURVIVES ME**

\_\_\_\_\_  
Printed Name and Mailing Address

**ALTERNATE BENEFICIARY-OPTIONAL**

**IF MY PRIMARY BENEFICIARY DOES NOT SURVIVE ME, I DESIGNATE THE FOLLOWING ALTERNATE BENEFICIARY IF THAT BENEFICIARY SURVIVES ME**

\_\_\_\_\_  
Printed Name and Mailing Address

**TRANSFER ON DEATH**

AT MY DEATH I TRANSFER MY INTEREST IN THE DESCRIBED PROPERTY TO THE BENEFICIARIES AS DESIGNATED ABOVE. BEFORE MY DEATH I HAVE THE RIGHT TO REVOKE THIS DEED.

SIGNATURE OF OWNER OR OWNERS MAKING THIS DEED

\_\_\_\_\_  
SIGNATURE DATE

\_\_\_\_\_  
SIGNATURE DATE

SIGNATURE OF WITNESSES

\_\_\_\_\_  
SIGNATURE DATE

\_\_\_\_\_  
SIGNATURE DATE

**Uniform Acknowledgment**

STATE OF  
COUNTY OF

On the <sup>th</sup> day of \_\_\_\_\_ in the year \_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_ personally know to me or proved to me on the basis of satisfactory evidence to be the individuals(s) whose names(s) is (are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies) and that by his/her/their signature(s) on the instrument, the individual(s) or the person upon behalf of which the individual(s) acted, executed the same.

\_\_\_\_\_  
Notary Public

**Uniform Acknowledgment**

STATE OF  
COUNTY OF

On the <sup>th</sup> day of \_\_\_\_\_ in the year \_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_ personally know to me or proved to me on the basis of satisfactory evidence to be the individuals(s) whose names(s) is (are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies) and that by his/her/their signature(s) on the instrument, the individual(s) or the person upon behalf of which the individual(s) acted, executed the same.

\_\_\_\_\_  
Notary Public

Record and Return to:

## **COMMON QUESTIONS ABOUT THE USE OF THIS FORM**

How do I use this form to revoke a Transfer on Death (TOD) Deed?

Complete this form. Have it acknowledged before a Notary Public Record the form in the public records in the County Clerk's Office of the County where the property is located. The form must be acknowledged and recorded before your death. or it has no effect.

How do I find the "legal description" of the property?

This information may be on the TOD Deed. It may also be available in the county clerk's office of the county where the property is located. If you are not absolutely sure, consult a lawyer.

How do I "record" the form?

Take the completed and acknowledged form to the County Clerk's Office of the county where the property is located. Follow the instructions given by the county clerk to make the form part of the official property records. If the property is located in more than one county you should record the form in each of those counties.

I am being pressured to complete this form. What should I do?

Do not complete this form under pressure. Seek help from a trusted family member, friend, or lawyer.

I have other questions about this form. What should I do?

This form is designed to fit some but not all situations. If you have other questions, consult a lawyer.

This act shall take effect on the ninetieth day after it shall have become a law, provided that section 424 of the Real Property law, as added by section twelve of this act, shall apply to any transfer on death deed made before, on, or after the effective date of this act by a transferor dying on or after the effective date of this act.