

AFFIDAVIT OF HEIRSHIP

TITLE CO: _____
TITLE NO: _____
DATE: _____

STATE OF _____

COUNTY OF _____

_____, being duly sworn, depose(s) and states as follows

I reside at _____
_____.

I am over eighteen years of age. _____

I am the _____ of deceased, who held title to Premises described as follows:

_____;

The said _____ (hereinafter, "Decedent") died a resident of the County of _____, State of New York, on the _____ day of _____, 20____, seized of said Premises.

I conducted a diligent search of the effects and property of the Decedent and was unable to find any Last Will or any record indicating that the Decedent prepared a Last Will. The Decedent during his/her lifetime did not indicate to me that he/she had prepared any Law Will and I have no independent reason to believe that the Decedent left a Last Will. I, therefore, believe that the decedent died intestate, without leaving a Last Will. I did not institute any administration proceedings, nor have I received any Citation or notice of any administration proceedings for the estate of the Decedent.

That, at the time of his/her death, Decedent left him/her surviving as his/her only lawful heirs, the following named persons:

<u>NAME</u>	<u>ADDRESS</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____;

That, other than those above named, said decedent left him/her surviving no spouse, no child or children, (legitimate or illegitimate), no adopted child or children, no descendants of any deceased child or children, no descendants of any deceased adopted child or children, no father or mother, no brothers or sisters, no issue of any deceased brothers or sisters, no grandparents, no uncle, no aunt, and no issue of a deceased uncle or aunt.

That all of the persons above named are of full age. _____

That all of the persons above named are of sound mind. _____

That said Decedent was, in their lifetime, a citizen of the United States. _____

I know the statements herein to be true of my own personal knowledge and I make this affidavit knowing that _____ Title Insurance Company will rely upon the truth of these statement to issue its policy of title insurance covering the above Premises without exception for interests of persons other than the heirs above named who may make claims to the Premises under the estate of the above-named decedent.

Sworn to before me on _____,

Notary Public State of New York