**QUITCLAIM DEED**
(Individual)

STATE OF MINNESOTA

                                COUNTY

**1. CERTIFICATE OF REAL ESTATE VALUE (eCRV) DECLARATION** *(Select One)*:

* Total value received for the property is $3,000.00

 eCRV Number:                                                   .

Deed Tax Due: $                                                   .

* Total value received for the property is $3,000.00 or less.

  **2. THE PARTIES**

 LET IT BE KNOWN TO ALL, this agreement is made between the following parties:

                                             a ☐ married / ☐ unmarried individual, residing at

                                                    ,                           ,             ,            who shall be identified as

 the “GRANTOR”; and

                                            , residing at                                ,

                ,                      ,                   , who shall be identified as the “GRANTEE.”

**3.** In this deed, made effective on                                ; the GRANTOR does hereby

 ***remise, release, and forever quitclaim*** all the rights, title, interest, and claim in or to

 the following described real estate. The deed conveys the grantor's current rights and

 interests in the described property to the grantee and their successors, but it does not cover

 any title acquired in the future unless specifically stated.

**4. PROPERTY DESCRIPTION
 I.** The **property** has the Tax Parcel ID Number                                          ;

**II.** The **property** is located at                                                     ,                       ,           ,        ; begins at section                              , Township                  , Range             , and is within the following metes and bounds                                                                              , running parallel to the following section                                                                              .

**III.** This deed contains the following attached documents (Select one):

* Supplemental Description :                                                                                                           .
* Map :                                                                                                           .
* Plot plan : .
* Not Applicable.

**IV**. The property identified in this deed is ☐ is not ☐ registered as the homestead of the Grantor(s).

**V.**  **Well Disclosure**

* The Grantor certifies that there are no wells on the property.
* A Well Disclosure Certificate is attached to this deed.
* A Well Disclosure Certificate (WDC) has been electronically filed;
* The WDC Number is:                                                               .
* The Grantor affirms that there have been no changes in the status or quantity of wells
on the property since the last well disclosure certificate was submitted.

 ***This quitclaim deed is hereby executed by the Grantor as of***                                            ***.***

| Grantor Signature  |  |
| --- | --- |
| Name |  |

**NOTARY ACKNOWLEDGMENT**

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.

Notary’s Signature:

Notary’s Printed Name:

Commission Expires:

(Seal)