

Return To : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Quitclaim Deed Individual

STATE OF GEORGIA  
\_\_\_\_\_ COUNTY

Prepared By \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**1. THE PARTIES**

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

\_\_\_\_\_; residing at: \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, who shall be identified as the "GRANTOR"; and  
\_\_\_\_\_; residing at: \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, who shall be identified as the "GRANTEE".

**2.** This agreement is in consideration of the sum \_\_\_\_\_ or \$ \_\_\_\_\_ and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged.

**3.** The Grantor does hereby **remise, convey and quitclaim** unto the said Grantee forever all the right, title, interest, claim and demand which the said Grantor has in and to the property described below.

**4. PROPERTY DESCRIPTION**

I. The **property** with the Tax Parcel ID Number \_\_\_\_\_ is located at the address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_; \_\_\_\_\_ County.

II. The **property** begins at begins at \_\_\_\_\_, near the monument/landmark \_\_\_\_\_, Subdivisions \_\_\_\_\_, lot \_\_\_\_\_, block \_\_\_\_\_, unit \_\_\_\_\_, within the following metes and bound \_\_\_\_\_; running parallel to \_\_\_\_\_.

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

- Property description (supplemental sheet)
- Map or plan
- Not Applicable.

***In Witness Whereof, on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the undersigned Witness hereby attests that they were present and witnessed the GRANTOR sign and execute the deed.***

\_\_\_\_\_  
Grantor's Signature

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Grantor's Name

\_\_\_\_\_  
Witness Name

## Notary Acknowledgement

State of Georgia

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

This instrument was acknowledged before me this \_\_\_\_\_ day \_\_\_\_\_, 20\_\_\_\_\_, by

\_\_\_\_\_.

Personally Known

Produced Identification

Type and # of ID \_\_\_\_\_.

\_\_\_\_\_.

Signature, Notary Public, State of Georgia

\_\_\_\_\_.

Name, Notary Public

My Commission Expires: \_\_\_\_\_.

*Stamp/ Seal*