# **Quitclaim Deed**(Individual)

State of Pennsylvania Uniform Parcel ID No:                               .

                           County

1. **THE PARTES**

LET IT BE KNOWN TO ALL, THIS QUITCLAIM DEED made this               day                 , year                    by and between the following parties:

                                                                       , an individual residing at:

                                                              ,                            ,                   ,                   , who shall be identified as the “GRANTOR”; and

                                                                       , an individual residing at:

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

The terms "Grantor" and "Grantee" collectively refer to all Grantors and all Grantees mentioned above.

1. For and in consideration of the sum of                                            or $ and other consideration to them in hand paid, the receipt of which is hereby acknowledged.
2. The GRANTOR does hereby *release and forever quitclaim* into the Grantee and his heirs and assigns all right, title, claim*, and interest* of the said Grantors in and to the ***property*** described below.
3. **Property Description**
4. The ***property*** is located at the following address:                                                                ,

                         ,               ,                 ; in the county                                         .

1. The ***property*** has the Uniform Parcel Identifier Number                   ;

 Township                                 ; Municipality

 Contains the following metes and bounds

                                   .

1. The ***property*** is further described as follows:

|  |
| --- |
|  |

1. This deed contains the following attached documents *(Select one)*:
* Supplemental Description
* Map
* Plot plan
* N/A

***In confirmation hereof, the Grantor has executed and attested this document on the date first mentioned above.***

| Grantor’s Signature |  |
| --- | --- |
| Grantor’s Printed Name  |  |
| Grantor’s Address  |  |
| City, State, Zip |  |

This document has been executed in the presence of:

▢ Grantor

▢ Two Witnesses

|  |  |  |
| --- | --- | --- |
| Witness Signature  |  | Witness Signature  |
| Witness Name  |  | Witness Name  |

This quitclaim deed is duly acknowledged by:

▢ Notary Public

▢ Authorized Officer

**Certificate of Acknowledgment**

State of Pennsylvania

County of

I CERTIFY that on                          ,
personally came before me ,                   , and acknowledged under oath, to my satisfaction, that this person

(a) is named in and personally signed this Quitclaim Deed.

(b) signed, sealed and delivered this Quitclaim Deed as his or her act and deed.

Witnessed or Attested By:

|  |  |  |
| --- | --- | --- |
| Signature |  | Title or Rank |
| Printed Name |  |  |

 **NOTARY ACKNOWLEDGMENT**

State of Pennsylvania

 County

On     , before me,                            , Notary Public in and for said county, personally appeared

who has satisfactorily identified him/herselves as the signer to the Quitclaim Deed documented above.

Signature:

Printed Name:

My Commission Expires :

(Seal)