**QUITCLAIM DEED**
(Individual/Joint)

STATE OF OHIO Mail Future Tax Statements To:

 COUNTY

1. **THE PARTIES**

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

(Select One)

* an unmarried individual;
* and , a married pair; residing at:                                     , , , , who shall be identified as the “GRANTOR(s)”; and

 a ☐ married /☐ unmarried individual, residing at:

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

1. In this quitclaim deed made effective as of for the consideration of or $ .
2. The Grantor does hereby convey, release, and forever quitclaim unto the Grantee all the right, title, and interest the Grantor may have in and to the ***property*** described below:
3. **PROPERTY DESCRIPTION**

1. The legal description of the ***property*** is as follows:

|  |
| --- |

1. The ***property*** with the Permanent Tax Parcel No:                                                ; is located at the address: , ; ,

             ; the property is located in the county of :                              .

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

**5.** Dower Rights.

* The Grantor is Unmarried.
* The Grantor is Married.
* A Spousal Waiver of Rights to the Property is included.
* Both spouses have signed below.

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

| Grantor Signature  |  | Grantor Signature  |
| --- | --- | --- |
| Grantor’s Printed Name |  | Grantor’s Printed Name |

**NOTARY ACKNOWLEDGMENT**

Commonwealth of Ohio
County of

On this                       day of            ,           , before me personally appeared                                , to me known to be the person (or persons) described in and who executed the foregoing instrument, and acknowledged that such person executed the same as such person’s (or persons’) free act and deed.

Notary’s Signature

Notary Name:

Date:

My Commission Expires:

(Seal)