**QUITCLAIM DEED**  
(Individual)

STATE OF SOUTH CAROLINA Property District/Map/Parcel No:

COUNTY

1. **THE PARTIES**

LET IT BE KNOWN TO ALL, this quitclaim deed made on                                         , by and between the following parties:

, residing at: ,

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

, residing at: ,                           , , ; who shall be identified as the “GRANTEE.”

1. This quitclaim deed is made effective as of , for the consideration of or $ .
2. The Grantor does hereby *release and forever quitclaim* unto the Grantee all the rights, title, and interest the Grantor may have in and to the property described below.
3. **PROPERTY DESCRIPTION**
4. The *property* with the District/Map/Parcel Number:                                                ; is located at the address:          ,                    ,

                ,                       ; the county of                             .

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

|  |
| --- |

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

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

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

| |  | | --- | | (Grantor's Signature) | |  | | (Grantor's Printed Name) | |  |
| --- | --- | --- | --- | --- | --- |

*In Witness Whereof*, on                               , I hereby attest that I was present and witnessed the GRANTOR sign and execute the deed.

| | Witness Signature | | --- | | Witness Name | | Street Address | | City, State, Zip | |  |
| --- | --- | --- | --- | --- | --- |

**NOTARY ACKNOWLEDGMENT**

State of South Carolina  
                                             County

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

Notary’s Signature

Notary Name:

Date:

My Commission Expires:

(Seal)