

This instrument was prepared by:

_____ [name]
_____ [street or postal address]
_____ [city, state, zip code]

GRANTEE(S): _____ [names]

SEND TAX NOTICES TO: _____
[postal address, city, state, zip code]

MAP PARCEL NUMBER: _____

AFFIDAVIT OF HEIRSHIP

Tennessee Code Annotated § 30-2-712.

STATE OF TENNESSEE

COUNTY OF _____

The undersigned, being duly sworn, deposes and says:

1. My full name is _____. I will refer to myself in this Affidavit as the Affiant.
2. I reside at _____. [street address, city, state, zip code]
3. I have personal knowledge of the matters stated in this Affidavit.
4. On _____ [date of death], _____ [full name of decedent] died at _____ [place of death]. I will refer to this person as the Decedent.
5. The real property to which this Affidavit applies is located at _____ [address] in _____ County, Tennessee, more fully described as: [complete legal description] _____

- For prior title, see Book _____ [number], Page _____ [number] in the Register's Office of _____ County, Tennessee.
6. At the time of the Decedent's death, the Decedent resided at _____. [street address, city, state, zip code]
7. The estate of the Decedent [select one]
 Was not administered in a proceeding supervised by a court.
 Was administered in a proceeding supervised by a court in _____ [county and state] in the _____ [court] in case no. _____.

8. Facts concerning my relationship to the Decedent are: _____
_____.

9. Additional facts pertinent to determine who is legally entitled to the estate of the Decedent at the time of the Decedent's death are: _____
_____.

Affiant

Sworn to and subscribed before me this ____ day of _____, 20__.

My Commission expires: _____

Notary Public