RECORDING REQUESTED BY:
WHEN RECORDED MAIL TO AND MAIL TAX STATEMENTS TO:
NAME:
ADDRESS:
CITY:
STATE/ZIP:
Title Order No.: Space Above This Line For Recorder's Use Escrow No.:
REVOCATION OF REVOCABLE TRANSFER ON DEATH (TOD) DEED (California Probate Code § 5600)
THE UNDERSIGNED GRANTOR(s) DECLARE(s):
This conveyance is exempt from Documentary Transfer Tax under Revenue and Taxation Code § 11930.
This conveyance is exempt from Preliminary Change of Ownership Report under Revenue and Taxation Code § 480.3.
IMPORTANT NOTICE: THIS FORM MUST BE RECORDED TO BE EFFECTIVE
This revocation form MUST be RECORDED before your death or it will not be effective. This revocation form only affects a transfer on death deed that YOU made. A transfer on death deed made by a co-owner of your property is not affected by this revocation form. A co-owner who wants to revoke a transfer on death deed that he/she made must complete and RECORD a SEPARATE revocation form.
PROPERTY ASSESSOR'S PARCEL NUMBER
PROPERTY DESCRIPTION
(Print the legal description of the property affected by this revocation)

REVOCATION

I revoke any TOD deed to transfer the described property that I executed before executing this form.

SIGNATURE AND DATE

ACKNOWLEDGMENT OF NOTARY

(A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document)

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STATE OF CALIFORNIA }	
COUNTY OF } <i>S.S.</i>	
On before me, (here insert name and title of the officer), personally appeared	
(here insert name and the of the officer), personally appeared	
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is subscribed to the within instrument and acknowledged to me that he/she/they executed the sin his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.	ame nent
I certify under PENALTY OF PERJURY under the laws of the State of California that foregoing paragraph is true and correct.	the
WITNESS my hand and official seal.	
Signature	