

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

(Sign and print your name below (your name should exactly match the name shown on your title documents)

Date: _____
_____ (Sign Name)

(Print Name)

Date: _____
_____ (Sign Name)

(Print Name)

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)

