

AFFIDAVIT OF HEIRSHIP

State of New York):
County of): ss:

Title No.: _____
Premises: _____
Exception No.: _____

_____, being duly sworn do/does hereby depose and state as follows:

1. That I am/we are the _____ [state relationship] of _____ deceased, who acquired title to the above premises by deed dated _____ recorded _____ in Liber _____ page _____ in the office of the Clerk/Register of the County of _____.

2. That the above named decedent died

testate, having executed a Last Will and Testament

intestate, without a Last Will and Testament

and no proceedings have been commenced as to his/her Estate, a resident of the County of _____, State of New York, on the _____ day of _____, _____, seized of said premises leaving him/her surviving as his/her only surviving relatives, the following named persons:

Name: _____ Relationship: _____
Address: _____

Name: _____ Relationship: _____
Address: _____

Name: _____ Relationship: _____
Address: _____

Name: _____ Relationship: _____
Address: _____

Name: _____ Relationship: _____
Address: _____

3. That said decedent left him/her surviving no husband or wife, no child or children (legitimate or illegitimate), no adopted child or children, no descendants of any deceased child or children, no descendants of any deceased adopted child or children, no father or mother, no brothers or sisters, no issue of any deceased brothers or sisters, no grandparents, no uncle, no _____ of the statements herein contained as a basis for the issuance of its title policy(ies) and I/we acknowledge that the Company is entitled to so rely. In further consideration of the Company issuing its title policy(ies), I/we agree to fully protect, defend, indemnify and hold Company forever harmless for any loss, liens, claims, costs, expenses (including, but not limited to court costs, legal fees and expenses which the Company may incur to enforce a lien, and no issue of a deceased uncle or aunt other than those above named.

4. That all of the persons above named are of full age, except _____.

5. That all of the persons above named are of sound mind, except _____.

6. That none of the persons above-named have been adopted, except: _____.

7. That said deceased in his/her lifetime was a citizen of the United States or a subject of _____.

8. That I/we make this Affidavit to induce the Eagle Abstract Corp. and its underwriter (the Company) to issue its title policy(ies). The statements made herein are based upon my/our actual knowledge of the facts. I/we realize that the Company is relying upon the truth this indemnification), or damage which Company may incur because of or arising from this Affidavit, or as a result of Company's acceptance of and reliance upon this, my/our Affidavit, or from Company having to perform or take any action under the Title Policy to cure, remove, compromise, satisfy, discharge, or dispose of any lien, encumbrance or objection to title affecting the Property and not disclosed in this Affidavit.

Sworn to before me this _____
day of _____, _____

Notary Public