**This is a two-part form. The first affidavit is for title company internal use. The second, shorter affidavit is for recording in connection with claiming an exemption from real estate excise tax.**

LACK OF PROBATE AFFIDAVIT (STATE OF WASHINGTON)

**FOR SEPARATE PROPERTY, COMMUNITY PROPERTY, JOINT TENANCY OR TRANSFER ON DEATH DEEDS**

Title Insurance Commitment No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STATE OF )

SS:

COUNTY OF )

The undersigned, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, executes this affidavit relating to the estate of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (herein “Decedent”), who died on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , in the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(**A copy of the death certificate is attached hereto.**)

The undersigned, being first duly sworn, on oath deposes and says:

That the undersigned is (check one):

the lawful surviving spouse of the Decedent

Surviving child of the Decedent

Registered domestic partner of the Decedent

One of the joint tenants named in that certain instrument creating a joint tenancy with a right of survivorship identified in that certain deed recorded on \_\_\_\_\_\_\_\_\_\_\_\_\_ [*mm/dd/yyyy*], under Recording No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, Washington,

other (identify:) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

That the undersigned has listed below all of the heirs at law and next of kin of Decedent, including but not limited to:

1. spouse or registered domestic partner; **and**

2. children, adopted children, the issue of any predeceased child or adopted child (if decedent left no surviving children, then the undersigned has listed below all of the surviving grandchildren, parents, brothers and sisters of decedent); **and**

3. ***all parties who would have been heirs at law if the decedent had not been married or a registered domestic partner on the date of death; see RCW11.04.015:***

That the heirs at law and next of kin of the decedent are (list all parties, using the reverse side or attaching a list if necessary):

Name & relationship

Address:

Name & relationship

Address:

Name & relationship

Address:

Name & relationship

Address:

Name & relationship

Address:

That immediately prior to the date of death the Decedent was an owner of the real estate described in the above referenced Title Insurance Commitment (herein the “Real Estate”), and that the Decedent’s ownership interest was [*check one*]:

Community property

Separate property

Joint tenancy property

CHECK ALL BOXES WHICH APPLY IN EACH SECTION:

1. That on the date the Real Estate was purchased the Decedent was:

married to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

unmarried, not a registered domestic partner

unmarried, a registered domestic partner of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**2.** That on the date of death the Decedent was:

married to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

unmarried, not a registered domestic partner

unmarried, a registered domestic partner of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**3.** That on the date of death the Decedent was a citizen of the following country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and a permanent resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (if Decedent was a resident different from that of their citizenship).

**4.**  That the decedent left a Will, ***a copy of which is attached hereto***.

That the decedent left no Will.

That the decedent executed a Community Property Agreement. It was recorded under \_\_\_\_\_\_ County recording number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***(if unrecorded, attach a copy)***

**5.**  That the decedent’s estate is not being probated.

That the decedent’s estate is subject to probate proceedings in \_\_\_\_\_\_\_ County, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, under Probate No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**6.** If title transferred pursuant to a Transfer on Death Deed:

That there was no consideration (monetary, non-monetary, in-kind, etc.) given for the deed

That there was consideration given in the amount of $\_\_\_\_\_\_\_\_\_\_, including the value of monetary, non-monetary, in-kind, and other consideration.

**7.**  That the estate of the decedent is exempt from State and/or Federal succession or inheritance taxes.

That State and/or Federal succession or inheritance taxes in the amount of $ \_\_\_\_\_\_\_\_\_\_\_\_ have been paid. Copies of the release/discharge are attached hereto.

That State and/or Federal succession or inheritance taxes are due in the approximate amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_, but have not been paid.

**8.**  That the decedent has not received assistance from the State of Washington for medical care.

That the decedent has received assistance from the State of Washington for medical care.

That the State of Washington has been fully reimbursed for assistance for medical care.

**9.** If title was owned by the decedent in ***joint tenancy***:

That at all times from the date on which the joint tenancy was created to the death of the Decedent, each of the joint tenants recognized that the Real Estate was held in joint tenancy,

That the interest of no one or more of the joint tenants has ever been independently conveyed, encumbered or otherwise separated from the interest of the other joint tenant(s), either voluntarily or involuntarily, whether by specific act or by operation of law;

That the joint tenancy continued in full force until the death of the Decedent and, if there are two or more surviving joint tenants, including the undersigned, the joint tenancy continues in effect as to the interests of the surviving joint tenants.

That the undersigned knows of his/her own knowledge, and so states, that each and all of the obligations against the estate of the Decedent (including, but not limited to: all the debts of decedent; all of the expenses of Decedent’s last illness, funeral and burial; promissory notes; installment contracts and mortgages; and state and federal succession taxes upon Decedent’s estate, if applicable) have been paid in full, except as follows (*use reverse side or attach a list if necessary*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

That the value of the Decedent’s estate at date of death, including all real and personal property, was approximately $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, including the value of community property of Decedent and Decedent’s surviving spouse or domestic partner, if any, of approximately $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and including the value of Decedent’s separate property, if any, of approximately $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and including the full value of all other property, if any, held by the Decedent in joint tenancy of approximately $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

This affidavit is made to induce \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TITLE INSURANCE COMPANY (the Company) to insure real property covered by the Company’s commitment for title insurance number set forth above, in which Decedent held an interest at the time of the Decedent’s death. The undersigned urges the Company to issue its policy of title insurance in full reliance upon the representations set forth herein. The undersigned, for himself/herself and for the undersigned’s heirs, executors and administrators, indemnifies the Company or any other person, including a purchaser of the Real Estate, for any loss arising from reliance on any misstatement of fact herein.

DATED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Signature)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Print or type full name)***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***(Full address and telephone number)***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SUBSCRIBED and SWORN TO before me this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public in and for the State of \_\_\_\_\_\_\_\_\_\_\_\_\_

Residing at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After recording, return to:

**INHERITANCE LACK OF PROBATE AFFIDAVIT**

**(To Be Recorded for Excise Tax Affidavit Claiming Exempt Transfer of Ownership)**

STATE OF )

SS:

COUNTY OF )

The undersigned, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, executes this affidavit relating to the estate of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (herein “Decedent”), who died on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , in the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, then being a resident of the City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. (**A copy of the death certificate is attached hereto.**)

The undersigned, being first duly sworn, on oath deposes and says:

1. This Affidavit is to be recorded as an affirmation of facts showing that I am the rightful heir to the property described below.

**Relationship of the Affiant to the Decedent**

2. The undersigned is (check one):

the lawful surviving spouse of the Decedent

Registered domestic partner of the Decedent

Surviving child of the Decedent

One of the joint tenants named in that certain instrument creating a joint tenancy with a right of survivorship identified in that certain deed recorded on \_\_\_\_\_\_\_\_\_\_\_\_\_ [*mm/dd/yyyy*], under Recording No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, Washington.

other (identify:) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Names of All Heirs of the Decedent**

3. That all the heirs at law and next of kin of the decedent that were living at the time decedent’s death are listed below. Heirs at law and next of kin of decedent include, but are not limited to:

(a) a spouse or registered domestic partner, and

(b) children, adopted children, the children of any predeceased child or adopted child (if decedent left no surviving children, then the undersigned has listed below all of the surviving parents, brothers and sisters of decedent).

.

[Use the reverse side or attaching a list if necessary)]

Name & relationship

Name & relationship

Name & relationship

Name & relationship

**Description of the Property**

4. That among the items of real property owned by the Decedent at the time of death was real estate located in the County of \_\_\_\_\_\_\_\_\_, State of Washington, and described as follows:

[INSERT either complete legal description, or refer to attachment for full legal description]

5. **Status of the Will (if any)**

The decedent left a Will that devises real property.

The decedent left no Will that devises real property.

DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Signature)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Print or type full name)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Full address and telephone number)*

State of \_\_\_\_\_

County of \_\_\_\_\_

SUBSCRIBED and SWORN TO before me this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_,

by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public in and for the State of \_\_\_\_\_\_\_

residing at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_