

# CERTIFICATE OF TRUST

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

1. **AFFIANT.** I, \_\_\_\_\_ (“Affiant”), being duly sworn, deposes and states under penalty of perjury that the foregoing is true and correct.

2. **TRUST.** The Trust is known as \_\_\_\_\_ (“Trust”).

The Trust has not been terminated, revoked, modified, or amended in any manner that would cause the representations contained in this **Certification of Trust** to be incorrect.

a) Type. The Trust is considered: (check one)

- Revocable

- Irrevocable

b) Date. The Trust was signed on \_\_\_\_\_.

c) Tax ID Number. \_\_\_\_\_

3. **SETTLOR(S).** \_\_\_\_\_ (“Settlor(s)”) with a mailing address of \_\_\_\_\_.

4. **TRUSTEE(S).** \_\_\_\_\_ (“Trustee(s)”) with a mailing address of \_\_\_\_\_.

5. **SUCCESSOR TRUSTEE(S).** \_\_\_\_\_ (“Successor Trustee(s)”) with a mailing address of \_\_\_\_\_. This is the party who will assume the Trustee’s duties upon their resignation, incapacitation, or death.

6. **AUTHORITY.** The authority to act on behalf of the Trust requires: (check one)

- One (1) Trustee to sign.

- \_\_\_\_\_ Trustee(s) to sign.

7. **POWERS.** The Trustee(s) have: (check one)

- Full powers to sell, convey and to mortgage or encumber real and personal property under this Trust.

- Limited powers to: \_\_\_\_\_.

8. **REAL ESTATE.** The Trust includes: (check one)

- No real estate.
- Real estate with a legal description of: \_\_\_\_\_.

9. **EXECUTION.** I, the Affiant, declare that this certificate has been examined by me and its contents are true and correct.

Affiant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

### NOTARY ACKNOWLEDGEMENT

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.

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

The foregoing instrument was acknowledged before me, \_\_\_\_\_,  
on \_\_\_\_\_, by the undersigned, \_\_\_\_\_, who is personally  
known to me or satisfactorily proven to me to be the person whose name is subscribed  
to the within instrument.

WITNESS my hand and official seal.

Signature: \_\_\_\_\_ (Seal)