*Space above this line for recorder’s use only*

**After Recordation return by (****) Mail (****) Pick up to Prepared by:**

Name: [RECIPIENT NAME] Name: [PREPARER NAME]

Address: [RECIPIENT STREET ADDRESS] Address: [PREPARER STREET ADDRESS]

[RECIPIENT CITY, STATE, ZIP] [PREPARER CITY, STATE, ZIP]

**Tax Map Key Number**:[TAX MAP KEY NUMBER]

Prior Recorded Instrument Reference No.: [PRIOR RECORDED INSTRUMENT REFERENCE NO.]

**HAWAII QUIT CLAIM DEED**

STATE OF HAWAII

[COUNTY NAME] COUNTY

KNOW ALL MEN BY THESE PRESENTS, that for and in consideration of the sum of

[AMOUNT (IN WORDS)] ($[AMOUNT (AS A NUMBER)]) in hand paid to

[GRANTOR NAME(S)], a [GRANTOR(S) MARITAL STATUS], (married to [GRANTOR(S) SPOUSE NAME]), residing at [GRANTOR(S) STREET ADDRESS] (hereinafter known as the “Grantor(s)”) hereby remise, release, and forever quitclaim to [GRANTEE NAME(S)], a [GRANTEE(S) MARITAL STATUS], (married to [GRANTEE(S) SPOUSE NAME]), residing at [GRANTEE(S) STREET ADDRESS] (hereinafter known as the “Grantee(s)”) all the rights, title, interest, and claim in or to the following described real estate, situated in [COUNTY NAME] County, Hawaii, for which Certificate of Title No. [CERTIFICATE OF TITLE NO.] was duly issued, to-wit:

[ENTER PROPERTY LEGAL DESCRIPTION HERE (OR ATTACH AND INSERT)].

To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity, and claim whatsoever for the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](http://esign.com/) [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](http://esign.com/)

**Grantor’s Signature Grantor’s Signature**

[GRANTOR NAME] [GRANTOR NAME]

Grantor’s Name Grantor’s Name

[GRANTOR STREET ADDRESS] [GRANTOR STREET ADDRESS]

Street Address Street Address

[GRANTOR CITY, STATE, ZIP] [GRANTOR CITY, STATE, ZIP]

City, State & ZIP City, State & ZIP

STATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, whose name is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they executed the same voluntarily on the day the same bears date.

Given under my hand this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (mm/dd/yyyy)

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

**Notary Public**

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_