|  |  |
| --- | --- |
| **Prepared By:**  Name: [PREPARER NAME]  Address: [PREPARER STREET ADDRESS]  [PREPARER CITY, STATE, ZIP]  **After Recording Return To:**  Name: [RECIPIENT NAME]  Address: [RECIPIENT STREET ADDRESS]  [RECIPIENT CITY, STATE, ZIP] |  |

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

**NEW JERSEY QUIT CLAIM DEED**

STATE OF NEW JERSEY

[COUNTY NAME] COUNTY

THIS QUIT CLAIM DEED is made on [MONTH & DAY (E.G., MARCH 22ND)], [YEAR],

between [GRANTOR NAME(S)], a [GRANTOR(S) MARITAL STATUS], with a mailing address of [GRANTOR(S) MAILING ADDRESS] (hereinafter known as the “Grantor(s)”) and [GRANTEE NAME(S)], a [GRANTEE(S) MARITAL STATUS], with a mailing address of [GRANTEE(S) MAILING ADDRESS] (hereinafter known as the “Grantee(s)”).

The Grantor(s) hereby remises, releases, and forever quitclaims to the Grantee(s) all the rights, title, interest, and claim in or to the property described below (hereinafter known as the “Property”). This transfer is made for the sum of [AMOUNT (IN WORDS)] ($[AMOUNT (AS A NUMBER)]). The Grantor(s) acknowledges receipt of this money.

The Property consists of the land and all the buildings and structures on the land in [CITY NAME] City, [COUNTY NAME] County, New Jersey. The legal description is:

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

Tax Map Reference: Municipality of [MUNICIPALITY NAME]

Block No. [BLOCK #] Lot No. [LOT #] Qualifier No. [QUALIFIER #]

- No property tax identification number is available on the date of this deed (check if applicable).

[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_