|  |  |
| --- | --- |
| **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]  **Until a Change is Requested, Mail Tax Statements To:**  Name: [RECIPIENT NAME]  Address: [RECIPIENT STREET ADDRESS]  [RECIPIENT CITY, STATE, ZIP] |  |

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

**OREGON TRANSFER ON DEATH DEED**

**NOTICE TO OWNER**.

You should carefully read all information on this form. You may want to consult a lawyer before using this form.

This form must be recorded before your death or it will not be effective.

**IDENTIFYING INFORMATION**.

Owner or Owners Making This Deed:

Owner Full Name: [OWNER NAME] Marital Status: [OWNER MARITAL STATUS]

Mailing Address: [OWNER MAILING ADDRESS]

Owner Full Name: [OWNER NAME] Marital Status: [OWNER MARITAL STATUS]

Mailing Address: [OWNER MAILING ADDRESS]

Legal Description of Property:

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

**PRIMARY BENEFICIARY**. I designate the following beneficiary if the beneficiary survives me.

Full Name: [PRIMARY BENEFICIARY NAME] Marital Status: [MARITAL STATUS]

Mailing Address: [PRIMARY BENEFICIARY MAILING ADDRESS]

**ALTERNATE BENEFICIARY** (OPTIONAL). If my primary beneficiary does not survive me, I designate the following alternate beneficiary if that beneficiary survives me.

Full Name: [ALTERNATE BENEFICIARY NAME] Marital Status: [MARITAL STATUS]

Mailing Address: [ALTERNATE BENEFICIARY MAILING ADDRESS]

**TRANSFER ON DEATH**. At my death, I transfer my interest in the described property to the beneficiaries as designated above. Before my death, I have the right to revoke this deed.

**SPECIAL TERMS** (OPTIONAL).

[ENTER SPECIAL TERMS FOR BENEFICIARY, IF ANY (OR ATTACH AND INSERT)]

**SIGNATURES OF OWNERS MAKING THIS DEED**.

Owner Signature: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](http://esign.com/) Date: [MM/DD/YYYY]

Printed Name: [OWNER NAME]

Owner Signature: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](http://esign.com/) Date: [MM/DD/YYYY]

Printed Name: [OWNER NAME]

**ACKNOWLEDGMENT**.

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

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

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ whose names are 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_