Prepared By:

Name: _____
Address: _____
_____

After Recording Return To:

Name: _____
Address: _____
_____

Space above this line for recorder's use only

VERMONT ENHANCED LIFE ESTATE DEED

STATE OF VERMONT
COUNTY OF _____

KNOW ALL PERSONS BY THESE PRESENTS, that
I/We, _____ of
_____,
Grantor(s), without consideration, by these presents, do freely GIVE, GRANT, SELL, CONVEY, AND CONFIRM unto the Grantee(s), _____
of _____, and
their heirs and assigns forever as _____ a certain piece of land in
_____, in the County of _____, and State of Vermont,
described as follows:

[WRITE LEGAL DESCRIPTION HERE OR ATTACH AND INSERT]

GRANTOR(S)'S RESERVED RIGHTS:

This is an enhanced life estate deed executed pursuant to, and with the rights and privileges set forth in, 27 V.S.A. chapter 6, the Enhanced Life Estate Deed Act. The Grantor(s), or the survivor of them, hereby reserve unto themselves: (a) a common law life estate, with the exclusive use, possession, and enjoyment of the property; and (b) the right to convey the property. Reference is hereby made to the aforementioned deeds and records and to the deeds and records contained in those documents, in further aid of this description.

TO HAVE AND TO HOLD said granted premises, with all the privileges and appurtenances thereof, to the said Grantee(s), _____, and their heirs and assigns, to their own use and behoof forever, as _____.

I/We, the said Grantor(s), for ourselves and our heirs, executors, administrators, and assigns do covenant with the said Grantee(s), and their heirs and assigns, that until the ensealing of these presents we are the sole owners of the premises and have good right and title to convey the same in the manner aforesaid, that they are FREE FROM EVERY ENCUMBRANCE, except as aforesaid, and the Grantor(s) hereby engage to WARRANT AND DEFEND the same against all lawful claims whatsoever, except as otherwise provided in this deed.

I/WE HAVE HEREUNTO set our hands this _____, of _____, 20____.

Grantor's Signature	**Grantor's Signature**
Grantor's Name	Grantor's Name
Street Address	Street Address
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 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: _____