**When Recorded Return To:**

Name: [RECIPIENT NAME]

Address: [RECIPIENT STREET ADDRESS]

[RECIPIENT CITY, STATE, ZIP]

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

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

**WASHINGTON TRANSFER ON DEATH DEED**

(*Last name first, then first name and initial(s))*

Grantor Full Name: [GRANTOR NAME] Marital Status: [GRANTOR MARITAL STATUS]
Address: [GRANTOR ADDRESS]

Grantor Full Name: [GRANTOR NAME] Marital Status: [GRANTOR MARITAL STATUS]
Address: [GRANTOR ADDRESS]

Abbreviated Legal Description: [ENTER ABBREVIATED LEGAL DESCRIPTION OF PROPERTY]

Assessor’s Property Tax Parcel or Account #: [PROPERTY TAX PARCEL OR ACCOUNT #]

GRANTOR, [GRANTOR NAME(S)] for and in consideration of transfer on death pursuant to the Washington Uniform Real Property Transfer on Death Act, conveys and quitclaims to the following-designated beneficiary, as GRANTEE, effective only upon the death of Grantor, all right, title and interest in and to the following-described real estate, situated in the County of [COUNTY NAME], State of Washington, including any interest therein which Grantor may hereafter acquire:

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

Tax Parcel No. [PROPERTY TAX PARCEL #]

**PRIMARY BENEFICIARY**. Grantor designates the following primary beneficiary if the primary beneficiary survives Grantor.

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

Address: [PRIMARY BENEFICIARY ADDRESS]

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

Address: [SECOND PRIMARY BENEFICIARY ADDRESS]

**ALTERNATE BENEFICIARY** (OPTIONAL). If the primary beneficiary does not survive Grantor, Grantor designates the following alternate beneficiary if that beneficiary survives Grantor.

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

Address: [ALTERNATE BENEFICIARY ADDRESS]

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

Address: [SECOND ALTERNATE BENEFICIARY ADDRESS]

**TRANSFER ON DEATH**. The Grantor transfers all of the Grantor's interest in the described real property, including without limitation any after acquired title of the Grantor, to the beneficiary designated above. Before the Grantor's death, the Grantor has the right to revoke this deed.

**SPECIAL TERMS** (OPTIONAL).

[ENTER SPECIAL TERMS HERE (OPTIONAL)]

**REAL ESTATE EXCISE TAX EXEMPTION**. The recording of this Transfer on Death Deed is not a "sale" as defined in RCW 82.45.010(1) and is therefore not subject to real estate excise

tax. The transfer that will occur under this Transfer on Death Deed at the time of the Grantor's

death is exempt from the Washington Real Estate Excise Tax by reason of RCW 82.45.010(3)

(b) and WAC 458-61A-202(6)(d).

DATED this [DAY] day of [MONTH], [YEAR].

**SIGNATURES**.

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

Printed Name: [GRANTOR NAME]

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

Printed Name: [GRANTOR 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_