

RECORDING REQUESTED BY:

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

WHEN RECORDED MAIL TO:

NAME:

ADDRESS:

CITY:

STATE/ZIP:

Title Order No.: _____ Space Above This Line For Recorder's Use Escrow No.: _____

AFFIDAVIT
SURVIVING SPOUSE SUCCEEDING TO TITLE TO
COMMUNITY PROPERTY BY RIGHT OF SURVIVORSHIP
(CALIFORNIA CIVIL CODE SECTION 682.1)

STATE OF CALIFORNIA}

COUNTY OF _____ } S.S.

_____, of legal age, being first duly sworn, deposes and says:

That _____, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as named as one of the parties in that certain _____, dated _____, executed by _____ to _____, husband and wife, as community property with right of survivorship, recorded on _____ as Instrument No. _____, in Book _____, Page _____, of Official Records of _____ County, California, covering the following described property situated in the County of _____, State of California:

Assessor's Parcel No.: _____.

Property Address: _____.

Dated: _____

State of California

County of _____

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____, by
_____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before
me.

Signature _____ (Seal)

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