QUIT CLAIM DEED **Minnesota Uniform Conveyancing Blanks**
Individual(s) to Individual(s) **Form 10.3.1 (2018)**

eCRV number:

DEED TAX DUE: $ _____ DATE: _____

(month/day/year)

FOR VALUABLE CONSIDERATION,

_____

(insert name and marital status of each Grantor)

_____

_____

_____ ("**Grantor**"), hereby conveys and quitclaims to

_____

(insert name of each Grantee)

_____

("**Grantee**"), as

(Check only one box.) ☐☐ joint tetenants in commonnants, , *(this conveyance is made to the named Grantees as tenants in common.)If more than one Grantee is named above and either no box is checked or both boxes are checked,*

real property in _____ County, Minnesota,
legally described as follows:

Check here if all or part of the described real property is Registered (Torrens) ☐

together with all hereditaments and appurtenances belonging thereto.

Check applicable box:

☐ The Seller certifies that the Seller does not know of any wells on the described real property.

☐ A well disclosure certificate accompanies this document or has been electronically filed. (If electronically filed, insert WDC number: _____.)

☐ I am familiar with the property described in this instrument and I certify that the status and number of wells on the described real property have not changed since the last previously filed well disclosure certificate.

Grantor

_____

(signature)

_____

(signature)

_____

(signature)

_____

(signature)

State of Minnesota, County of

_____

This instrument was acknowledged before me on _____, by _____

(month/day/year)

_____

(insert name and marital status of each Grantor)

_____

_____

.

(Stamp)

_____

(signature of notarial officer)

Title (and Rank): _____

My commission expires: _____

(month/day/year)

THIS INSTRUMENT WAS DRAFTED BY:
(insert name and address)

TAX STATEMENTS FOR THE REAL PROPERTY DESCRIBED IN THIS INSTRUMENT SHOULD BE SENT TO:
(insert legal name and residential or business address of Grantee)