Arms’ length Transaction by Surviving Spouse Affidavit

BEFORE ME, the undersigned authority, duly authorized to take acknowledgments and administer oaths, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (“Affiant”), who depose(s) and say(s) under penalties of perjury that:

1. This affidavit is made with regard to the following described property:

[insert legal description of real property] (“Subject Property”)

1. Affiant is the surviving spouse of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (“Decedent”), and the owner of Subject Property by virtue of that certain deed recorded \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in O.R. \_\_\_\_\_\_\_, Page\_\_\_\_\_\_\_, and/or under Instrument No. \_\_\_\_\_\_\_\_\_\_, of the Public Records of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County, Florida.
2. Affiant was continuously married to Decedent from a time prior to taking title to Subject Property through the date of death of Decedent.
3. Decedent was a U.S. citizen or permanent resident at the time of his death.
4. Affiant is conveying Subject Property to a bonafide purchaser for full and adequate consideration in an arms' length transaction.
5. This affidavit is made to induce CATIC (“Title Insurer”) to insure title to the real property described in item 1 above. Affiant agrees to indemnify Title Insurer and hold it harmless from any loss or damage resulting from its reliance on the matters set forth in this affidavit.

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

 (Affiant)

 Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
The foregoing instrument was sworn to and subscribed before me by means of [ ] physical presence or
[ ] online notarization this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ who [ ] is personally known or [ ] has produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_ as identification.

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

Notary Public

[Notary Seal]

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 My Commission Expires: \_\_\_\_\_\_\_\_