

(Top 3 inches reserved for recording data)

**AFFIDAVIT OF IDENTITY AND SURVIVORSHIP  
FOR JOINT TENANTS OR LIFE ESTATE**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**Name of Decedent**

**STATE OF MINNESOTA**

**COUNTY OF** \_\_\_\_\_



ss.

I, \_\_\_\_\_ (“Affiant”), being  
first duly sworn on oath state from my personal knowledge:

1. I reside at \_\_\_\_\_.
2. The Decedent is the person named in the certified copy of Certificate of Death attached to this affidavit.
3. The name of the survivor(s) owner(s) is/are: \_\_\_\_\_.
4. At death, the Decedent was an owner as ☐ joint tenant ☐ life tenant of real property in \_\_\_\_\_  
County, Minnesota, legally described as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ as shown by an instrument recorded as Document No.: \_\_\_\_\_ (or in Book \_\_\_\_ of \_\_\_\_  
Page \_\_\_\_.) in the Office of the County Recorder.

☐ as shown on Certificate of Title No. \_\_\_\_\_, filed with the Registrar of Titles of  
\_\_\_\_\_ County, Minnesota.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Affiant \_\_\_\_\_

STATE OF MINNESOTA

COUNTY OF HENNEPIN



ss.

Signed, sworn to (or acknowledged) before me on \_\_\_\_\_, 20\_\_ by \_\_\_\_\_.

Notary Stamp or Seal (or other Title or Rank)

\_\_\_\_\_  
Signature of Notary Public or Other Official

THIS INSTRUMENT DRAFTED BY:

Attorney for \_\_\_\_\_

Name \_\_\_\_\_

Firm \_\_\_\_\_

Street \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Attorney License No: \_\_\_\_\_

Telephone: \_\_\_\_\_

FAX: \_\_\_\_\_

Email: \_\_\_\_\_

Statements for real estate taxes on the real property  
should be sent to:

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