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REAL ESTATE AFFIDAVIT

Court File No. .....

COMMONWEALTH OF VIRGINIA VA. CODE § 64.2-510

..... **COUNTY OF FAIRFAX** ..... Circuit Court

....

NAME OF DECEDENT DATE OF DEATH

.....

NAME AND ADDRESS OF SUBSCRIBER

.....

☐ I have an interest as ..... in the real property of the decedent; AND/OR

☐ I qualified in ..... as

NAME OF COURT

the personal representative of the above-named decedent, who died intestate as to the real estate described herein, and who, at the time of death, was seized of real property in this jurisdiction, briefly described as

.....

.....

.....

The name and last known address of decedent's heirs are:

NAMES OF HEIRS	ADDRESSES	RELATIONSHIP	AGE

..... _____

DATE SIGNATURE OF SUBSCRIBER

State/Commonwealth of ..... [ ] City [ ] County of .....

Subscribed and sworn to before me

by .....

PRINT NAME OF SIGNATORY

this ..... day of ....., 20 ..... .

_____

[ ] CLERK [ ] DEPUTY CLERK [ ] NOTARY PUBLIC

My commission expires .....

Registration No. .....

VIRGINIA: In the Clerk's Office of the ..... Circuit Court this ..... day of ....., 20 ..... the foregoing AFFIDAVIT was filed and admitted to record.

Teste: _____

CLERK

By: _____, Deputy Clerk

FORM CC-1612 MASTER 10/12

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