

AFFIDAVIT OF HEIRSHIP

STATE OF NEW YORK)

SS.:

Title No.: _____

COUNTY OF _____)

_____, being duly sworn, deposes and says:

That (s)he is the _____ of deceased, who acquired title to premises known as _____, in _____ County, State of New York ("Premises").

That said _____ died a resident of the County of _____, State of New York, on the ___ day of _____, _____, seized of said premises, (testate) or (intestate), and no proceedings have been commenced as to his/her Estate leaving him/her surviving as his/her only lawful distributes, the following named persons:

NAME

ADDRESS

RELATIONSHIP

That said decedent left him/her surviving no husband or wife, no child or children, (legitimate or illegitimate), no adopted child or children, no descendants of any deceased child or children, no descendants of any deceased adopted child or children, no father or mother, no brothers or sisters, no issue of any deceased brothers or sisters, no grandparents, no uncle, no aunt, and no issue of a deceased uncle or aunt other than those above named.

That all of the persons above named are 18 years of age or older, except:

That all of the persons above named are of sound mind, except:

That none of the persons above-named have been adopted, except:

That said deceased in his/her lifetime was a citizen of the United States or a subject of

This affidavit is made to induce **American Dream Abstract, Inc.** and **First American Title Insurance Company of New York** to issue its policy of title insurance covering the above premises knowing that it relies upon the truth hereof.

Sworn to before me on this
___ day of _____, 20__

NOTARY PUBLIC