

**TERMINATION OF DECEDENT'S  
PROPERTY INTEREST**

**Use black ink**

DECEDENT'S NAME	DATE OF DEATH		
ADDRESS OF DECEDENT AT DATE OF DEATH	CITY	ST	ZIP

**PRESENTATION OF DEATH CERTIFICATE**  
I certify that I have viewed a certified copy of the decedent's death certificate.

\_\_\_\_\_ DATE \_\_\_\_\_  
REGISTER OF DEED'S SIGNATURE

**Interest in property is terminated under (please check appropriate statute):**

- s. 867.045 which pertains to property in which the decedent was a joint tenant, had a vendor's or mortgagee's interest, or had a life estate.  
(You must provide a copy of the document establishing joint tenancy or life estate.)
- s. 867.046 which pertains to property of a decedent specified in a marital property agreement; survivorship marital property; or a third party confirmation.  
(You must provide a copy of the document establishing interest in property)

Name and return address:

\_\_\_\_\_  
Parcel Identification Number

**Presentation of recorded document establishing interest in real estate.**

DOCUMENT #      VOLUME/REEL      PAGE/IMAGE      RECORDS/DEEDS

**Description of the real estate.**

**See Attached**

Description of personal property (if any) being transferred.

*You may list savings accounts, checking accounts and securities on attached pages. Indicate person(s) receiving property.*

**DECLARATION:** I(We) declare that this document is, to the best of my(our) knowledge and belief, true, correct and complete and is in conformity with the provisions and limitations of the Wisconsin Statutes. (If more space is needed, attach pages.)

Name and Address (List all remaindermen/ beneficiaries)	Applicant's Interest in Property <small>(ie: spouse, remainderman)</small>	Applicant Signature(Notarized) (print or type name below signature)	Date

This document was drafted by: *(print or type name below)*

**STATE OF WISCONSIN, County of**

Subscribed and sworn to before me by the above named person(s) on:

Signature of Notary or other person authorized to administer an oath (as per s 706.06, 706.07) \_\_\_\_\_

Print or type name:  
Title:

Date Commission Expires:

**NOTE: SEE DIRECTIONS.**  
Wisconsin Register of Deeds  
Association Form HT-110  
Website Version 03/2007