CONSULT YOUR LAWYER BEFORE SIGNING THIS INSTRUMENT - THIS INSTRUMENT SHOULD BE USED BY LAWYERS O		
THIS INDENTURE, made the BETWEEN	day of	, in the year
as admi late of Who died intestate on the party of the first part, and	inistrator (trix) of the Estate of day of , in th	e year
party of the second part,		
WITNESSETH, that whereas Surrogate's Court	County, New York on	ion were issued to the party of the first part b and by virtue d Trusts Law, and in consideration of
paid by the party of the second par successors and assigns of the party		do the party of the second part, the distribute
above described premises to the cen decedent had a the time of decedent' has power to convey or dispose of	ter lines thereof; <b>TOGETHER</b> the ap s death in said premises, and also the es , whether individual or otherwise; <b>TO</b>	rst part in and to an streets and roads abuttin purtenances, and also all the estate which th state therein, which the party of the first part I <b>D HAVE AND TO HOLD</b> the premises h assignees of the part of the second part fore

District

Section

Block

Lot(s)

USE ACKNOWLEDGMENT FORM BELOW WITHIN NEW YORK STATE ONLY:	USE ACKNOWLEDGMENT FORM BELOW WITHIN NEW YORK STATE ONLY:	
State of New York, County of }ss.:	State of New York, County of }ss.:	
On the day of in the year before me, the undersigned, personally appeared	On the day of in the year before me, the undersigned, personally appeared	
, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.	, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.	
ACKNOWLEDGMENT FORM FOR USE WITHIN NEW YORK STATE ONLY: [New York Subscribing Witness Acknowledgment Certificate]	<b>ACKNOWLEDGMENT FORM FOR USE OUTSIDE NEW YORK STATE ONLY:</b> {Out of State or Foreign General Acknowledgment Certificate}	
State of New York, County of }ss.:	(Complete Venue with State, Country, Province or Municipality)	
On the day of in the year before me, the undersigned, personally appeared	On the day of in the year before me, the undersigned, personally appeared	
the subscribing witness to the foregoing instrument, with whom I am personally acquainted, who, being by me duly sworn, did depose and say that he/she/they reside(s) in	personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), that by his/her/ their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument, and that such individual made such appearance before the undersigned in the	
( <i>if the place of residence is in a city, include the street and street number, if any, thereof</i> ); that he/she/they know(s)		
to be the individual described in and who executed the foregoing instrument; that said subscribing witness was present and saw said		
execute the same; and that said witness at the same time subscribed his/her/their name(s) as a witness thereto.	(Insert the city or other political subdivision and the state or country or other place the acknowledgment was taken).	

**ADMINISTRATOR'S DEED** 

TITLE NO.

ТО

DISTRICT SECTION BLOCK LOT COUNTY OR TOWN

> RECORDED AT REQUEST OF National Granite Title Insurance Agency, Inc. RETURN BY MAIL TO