

CONSULT YOUR LAWYER BEFORE SIGNING THIS INSTRUMENT – THIS INSTRUMENT SHOULD BE USED BY LAWYERS ONLY.

THIS INDENTURE, made the _____ day of _____, _____ and
BETWEEN

as administrator (trix) of the Estate of
late of

who died intestate on the _____ day of _____, _____ and
party of the first part, and

party of the second part,

WITNESSETH, that whereas _____ letters of administration were issued to the party of the first part
by the Surrogate's Court, _____ County, New York, on _____ and by virtue
of the power and authority given by Article 11 of the Estates, Powers and Trusts Law, and in consideration of

_____ dollars,

_____ paid by the party of the second part, does hereby grant and release unto the
party of the second part, the distributees or successors and assigns of the party of the second part forever,

ALL that certain plot, piece or parcel of land, with the buildings and improvements thereon erected, situate, lying and being in the

TOGETHER with all right, title and interest, if any, of the party of the first part, in and to any streets and roads abutting the above
described premises to the center lines thereof; TOGETHER with the appurtenances, and also all the estate which the said decedent
had at the time of decedent's death in said premises, and also the estate therein, which the party of the first part has or has power to
convey or dispose of, whether individually, or otherwise; TO HAVE AND TO HOLD the premises herein granted unto the party of
the second part, the distributees or successors and assigns of the party of the second part forever.

AND the party of the first part covenants that the party of the first part has not done or suffered anything whereby the said premises
have been incumbered in any way whatever, except as aforesaid.

Subject to the trust fund provisions of section thirteen of the Lien Law.

The word "party" shall be construed as if it read "parties" whenever the sense of this indenture so requires.

IN WITNESS WHEREOF, the party of the first part has duly executed this deed the day and year first above written.

IN PRESENCE OF:

USE ACKNOWLEDGEMENT FORM BELOW WITHIN NEW YORK STATE ONLY:

USE ACKNOWLEDGEMENT 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.

Signature and Office of Individual
taking acknowledgement

Signature and Office of Individual
taking acknowledgement

State, District of Columbia, Territory, Possession, or Foreign Country _____ } ss.:

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), 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 _____ (Insert the city or other political subdivision and the state or country or other place the acknowledgement was taken).

Signature and Office of Individual
taking acknowledgement

ADMINISTRATOR'S DEED

Title No. _____

DISTRICT
SECTION
BLOCK
LOT
COUNTY OR TOWN

TO

RECORDED AT REQUEST OF 0
ABSOLUTE TITLE AGENCY
RETURN BY MAIL TO:

**ABSOLUTE TITLE AGENCY, LLC
1706 SHEEPSHEAD BAY ROAD, STE 203
BROOKLYN, NY 11235
PH: 718-975-2175 FAX: 718-975-3225**

RESERVE THIS SPACE FOR USE OF RECORDING OFFICE

