Mail to: Waupaca County Register of Deeds 811 Harding St Waupaca, WI 54981
Check to: Waupaca County Register of Deeds

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.

_____ _____
REGISTER OF DEEDS SIGNATURE DATE

Recording area

Name and return address:

Parcel Identification Number

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 (1) property of a decedent specified in a marital property agreement, and also to (2)survivorship marital property. (You must provide a copy of the document establishing survivorship marital property.)

☐ s. 705.20 Nonprobate Transfers on Death. A provision for a nonprobate transfer on death in a trust, conveyance deed of gift or marital property agreement(You must provide a copy of the document establishing transfer at death.)

Presentation of recorded document establishing joint tenancy, life estate, survivorship marital property, vendor interest, or mortgagee interest in real estate.

DOCUMENT # VOLUME/REEL PAGE/IMAGE RECORDS/DEEDS

Description of the real estate.
Include only the extent of ownership (or vendor or mortgagee's interest) in land at the time of the decedent's death. If the extent of land is exactly the same as on the document, a copy of that document may be attached to describe the real estate. Attach tax bill(s) for year immediately preceding death, if applicable. (See directions.) The legal description of the property and the persons receiving the property are as follows: (If more space is needed, attach pages.)

☐ **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 of Person(s) Receiving Property	Relationship to Decedent	Signature(Notarized)	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 6/2003