

TRANSFER ON DEATH DEED AUTHORIZATION OF ASSESSMENT RECORDS CHANGE PULASKI COUNTY, VIRGINIA

- Please complete one authorization form per decedent.
- Enclose a true copy of the decedent's death certificate. A copy of the TOD deed is recommended.

NAME OF DECEDENT

DATE OF DEATH

Commission Expires: _

TAX PARCEL ID(S)

 $\hfill\square$ Transfer on Death Deed was recorded prior to the decedent's date of death:

RECORDATION DATE

INSTRUMENT NUMBER

The following individuals are the new legal owners of the aforementioned real estate parcel(s) in Pulaski County, Virginia:

OWNER NAME

MAILING ADDRESS

OWNER NAME

MAILING ADDRESS

The following copies and documentation are being provided:

- □ Transfer on Death Deed
- □ Certificate of Death
- □ Verification of Death

I, the undersigned, hereby affirm that the aforementioned individual is deceased and that a certified copy of the decedent's Certificate of Death or Verification of Death document is being provided as of this date:

PRINTED NAME OF SUBSCRIBE	R SIGNATURE OF SUBSCRIBER		DATE
	ACKNOWLEDGEMENT		
		State of	
		County of	
r	he foregoing instrument was subscribed and sworn before me this	day of	, 20
	by		[Name of Affiant].
			Notary Signature
	Notary Regist	ration Number:	, - 5