

INDIANA QUIT CLAIM DEED

Form QCD-1

Project: _____
Code: _____
Parcel: _____
Page: 1 of _____

THIS INDENTURE WITNESSETH, That _____ the Grantor(s) of _____ County, State of _____ Release(s) and Quit Claim(s) to the **STATE OF INDIANA**, the Grantee, for and in consideration of the sum of _____ Dollars (\$ _____) (of which said sum \$ _____ represents land and improvements acquired and \$ _____ represents damages) and other valuable consideration, the receipt of which is hereby acknowledged, certain Real Estate situated in the County of _____, State of Indiana, and being more particularly described in the legal description(s) as follows:

The Grantor(s) hereby specifically acknowledge(s) and agree(s) that the Real Estate conveyed herein is conveyed in fee simple and that no reversionary rights whatsoever shall remain with the Grantor(s), or any successors in title to the abutting lands of the Grantor(s), notwithstanding any subsequent abandonment, vacation, disuse, nonuse, change of use, conveyance, lease and/or transfer by the Grantee or its successors in title, of a portion or all of the said Real Estate or any right of way, roadway or roadway appurtenances established thereupon. This acknowledgement and agreement is a covenant running with the land and shall be binding upon the Grantor(s) and all successors and assigns.

<< insert jurat(s) here - otherwise delete >>



IN WITNESS WHEREOF, the said Grantor(s) has / have executed this instrument

this _____ day of _____, _____.

COMPANY NAME

Signature (Seal) Signature (Seal)

Printed Name Printed Name

Signature (Seal) Signature (Seal)

Printed Name Printed Name

STATE OF: _____:

SS:

COUNTY OF _____:

Before me, a Notary Public in and for said State and County, personally appeared

_____,

the Grantor(s) in the above conveyance, and acknowledged the execution of the same on the date aforesaid to be his / her / their voluntary act and deed and who, being duly sworn, stated that any representations contained therein are true.

Witness my hand and Notarial Seal this _____ day of _____, _____

Signature _____

Printed Name _____

My Commission expires _____

I am a resident of _____ County.

