

Recording Requested By and
When Recorded Mail to:

Recording Time, Book & Page

SOUTH CAROLINA QUITCLAIM DEED

COUNTY: _____
CITY: _____

TAX MAP NUMBER: _____
DATE: _____

Grantor

Grantee

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. corporation, partnership, limited liability company

The designation Grantor and Grantee as used herein shall include the named parties and their heirs, successors and assigns and shall include singular, plural, masculine, feminine or neuter as required by context.

KNOW ALL MEN BY THESE PRESENTS, that Grantor, for and in consideration of the sum of _____ and _____/100 Dollars (\$ _____), the receipt and sufficiency of which is hereby acknowledged, to Grantor paid by Grantee, does hereby remise, release and forever quitclaim unto Grantee all of Grantor's right, title and interest, if any, in and to the real estate (the "Premises") described as follows:

A plat of the subject property is recorded in Plat Book _____ at Page _____.

Derivation: This being the same property conveyed to Grantor by Deed of _____ dated _____ and recorded _____ in the Office of the _____ for _____ County in Deed Book _____ at Page _____.

TO HAVE AND TO HOLD unto Grantee and Grantee's heirs, successors and assigns forever, the Premises and the appurtenances thereto belonging or in anywise appertaining, and all the estate, right, title, interest and claim whatsoever of Grantor, if any.

SC Bar Form: _____
Last Revised: _____

This form is a basic form intended for use only by South Carolina licensed attorneys. Use by others may constitute the unauthorized practice of law.

IN WITNESS WHEREOF, Grantor has caused this Quitclaim Deed to be executed under seal this _____ day of _____, 20____.

**SIGNED, SEALED AND DELIVERED
IN THE PRESENCE OF:**

**GRANTOR:
Signature of individual Grantor**

Witness #1

Type name: _____ (SEAL)

Witness #2

Signature block for entity Grantor

Type name of entity _____

By: _____ (SEAL)
Signature of authorized signatory

Type name of authorized signatory: _____

Its: _____
(Type capacity of signatory)

STATE OF SOUTH CAROLINA

Acknowledgment for Individual Grantor

COUNTY OF _____

I, a Notary Public for South Carolina, do hereby certify that _____, Grantor, personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal this the _____ day of _____, 20____.

Notary Public for South Carolina

My Commission Expires:

STATE OF SOUTH CAROLINA

Acknowledgment for Entity Grantor

COUNTY OF _____

I, a Notary Public for South Carolina, do hereby certify that _____, Grantor, by _____
Its: _____, personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal this the _____ day of _____, 20____.

Notary Public for South Carolina

My Commission Expires:

SC Bar Form: _____
Last Revised: _____

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