



TITLE CLOSER

AFFIDAVIT

TRUST

AFFIDAVIT OF TRUST AND INDEMNITY

STATE OF NEW YORK)
) ss.
County of _____)

TITLE NO.: _____

I/We hereby certify to TitleSave Agency, Inc (the "Title Agency") and Chicago Title Insurance Company ("Underwriter") as follows with respect to a Trust entitled,

_____, created by a Trust Agreement dated as of ____/____/_____.

1. The names and addresses of all currently acting Trustees of the Trust are:

If there is more than one trustee, then their authority is as follows (check the applicable alternative).

- Each is authorized to currently act without the agreement of the other trustees(s)
- All Trustees must sign
- Any ___ of the Trustees must sign [If this alternative is selected, fill in the number of Trustees who must sign (e.g. 2 out of 3)]
- Other: _____

2. The Trust is currently in full force and effect.
3. The undersigned is/are all of the currently acting Trustees of the Trust. Unless otherwise indicated above, one undersigned Trustee (or each of the undersigned Trustees if there is more than one) is authorized, in his/her fiduciary capacity, to sign a mortgage on behalf of the trust and the real property known as _____

4. The Title Agency and Underwriter may rely on this Affidavit; all statements contained herein are and will continue to be true and correct.
5. The Trust Agreement has not been modified, amended or revoked in any manner which may cause any of the above certifications or statements to be untrue or misleading.
6. I/We declare under penalty of perjury that all of the foregoing statements are true, correct and complete and further agree to indemnify the Title Agency, Underwriter, its directors, officers, agents, employees and stockholders for, from and against any and all loss, cost, damage and expense (including reasonable attorneys fees) resulting from or in connection with any statement contained in this Affidavit being false, incorrect or incomplete.

SIGNATURE(S) OF TRUSTEE(S):

TRUST AFFIDAVIT

STATE OF NEW YORK)
) ss.
County of _____)

TITLE NO.: _____

I, _____, being duly sworn, deposes and says:

1. That I am the Trustee/Co-Trustee (circle one) of the _____
(name of trust) dated ____/____/____
2. I am within my rights to convey the premises known as:
_____.
3. That the above mentioned trust has not been subject to alteration, amendment, modification, or revocation since the effective date (signed date).
4. I/We make this affidavit to induce the underwriter to issue its policy of title insurance covering said premises, knowing that they will rely on the truth of the statements made in this affidavit.

Subscribed and Sworn before me on the _____ day of _____ in the year _____.

Notary Public

LIVING TRUST AFFIDAVIT

STATE OF NEW YORK)
) ss.
County of _____)

TITLE NO.: _____

I, _____, being duly sworn, deposes and says:

1. That I am the owner/seller of premises known as: _____
2. That I am the Grantor/Mortgagor and Trustee of a living trust dated ____/____/____ that included the above mentioned premises.
3. That as Grantor/Mortgagor, I have amended the Living Trust Agreement to allow the transfer of the above mentioned premises to _____ and _____ and I have done so in accordance to Article II section A. of the Living Trust Agreement that requires that any alteration, amendment, modification, or revocation shall be effective immediately upon delivery to the Trustee.
4. I/We make this affidavit to induce the underwriter to issue its policy of title insurance covering said premises, knowing that they will rely on the truth of the statements made in this affidavit.

Subscribed and Sworn before me on the _____ day of _____ in the year _____.

Notary Public