

(Top 3 inches reserved for recording data)

**REVOCATION OF  
TRANSFER ON DEATH DEED  
Minn. Stat. 507.071**

**Minnesota Uniform Conveyancing Blanks  
Form 10.8.10 (2016)**

DATE: \_\_\_\_\_  
(month/day/year)

NO DEED TAX DUE

Revocation of Transfer on Death Deed

The undersigned, \_\_\_\_\_,  
(insert name(s) of Grantor Owner(s) on Transfer on Death Deed)

hereby revoke(s) the Transfer on Death Deed recorded on \_\_\_\_\_, as  
(month/day/year)

Document Number \_\_\_\_\_ (or in Book \_\_\_\_\_ of \_\_\_\_\_,  
Page \_\_\_\_\_), in the Office of the  County Recorder  Registrar of Titles of  
(check the applicable box(es))

\_\_\_\_\_ County, Minnesota, affecting real property legally described as follows:  
(insert legal description)

Check here if all or part of the described real property is Registered (Torrens)

together with all hereditaments and appurtenances belonging thereto.

**NOTE: Pursuant to Minn. Stat. 507.071, to be effective this revocation must be recorded in a county in which a part of the real property is located before the death of the parties who execute this revocation.**

Grantor Owner(s)

\_\_\_\_\_  
*(signature)*

\_\_\_\_\_  
*(signature)*

State of Minnesota, County of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_, by  
*(month/day/year)*

\_\_\_\_\_  
*(insert name of Grantor Owner(s))*

(Stamp)

\_\_\_\_\_  
*(signature of notarial officer)*

Title (and Rank): \_\_\_\_\_

My commission expires: \_\_\_\_\_  
*(month/day/year)*

THIS INSTRUMENT WAS DRAFTED BY:  
*(insert name and address)*