

(Top 3 inches reserved for recording data)

**AFFIDAVIT OF IDENTITY AND SURVIVORSHIP
DECEDENT SPOUSE NOT IN TITLE**

**Minnesota Uniform Conveyancing Blanks
Form 50.2.4 (2025)**

State of Minnesota, County of _____

_____ (“**Affiant**”), being first duly sworn, on oath, or having made an affirmation in accordance with Minn. Stat. § 358.08, states from personal knowledge:

1. _____ (“**Surviving Spouse**”) has an interest in the real property located in _____ County, Minnesota, legally described as follows:

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

2. _____ (“**Decedent**”) is the person named in the attached certified copy of the Certificate of Death.

3. At the time of Decedent’s death, Decedent and Surviving Spouse were married.

4. This affidavit is given to evidence that any marital rights Decedent had in the real property described in section 1 have terminated.

Affiant

(signature of Affiant)

Signed and sworn to (or affirmed) before me on _____, by _____.
(month/day/year) (insert name of Affiant)

(Stamp)

(signature of notarial officer)

Title (and Rank): _____

My commission expires: _____
(month/day/year)

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

TAX STATEMENTS FOR THE REAL PROPERTY DESCRIBED IN THIS
INSTRUMENT SHOULD BE SENT TO:
(insert name and address of person to whom tax statements should be sent)