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**QUIT CLAIM DEED**

(Platted/Condominium)

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**Know All Persons by These Presents:**

**Whose address is:**

**Quit Claims to:**

**whose address is:**

**the following described premises situated in the c/t/v**  
State of Michigan, **to wit:**

County of \_\_\_\_\_

and \_\_\_\_\_

**More commonly known as:**

**For the full consideration of:**

**Subject to:**

**Dated this:** \_\_\_\_\_

**Witnesses:**

**Signed by:**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**State of Michigan**

**County of** \_\_\_\_\_

The foregoing instrument was acknowledged before me  
this \_\_\_\_\_ day of \_\_\_\_\_,  
By \_\_\_\_\_

\_\_\_\_\_  
**Notary Public:**

**Commission Expires:**

**County of Michigan:**

**Acting in:**

**Drafted by:**

**Return to:**

**Send Tax Bills to:** Grantee

\_\_\_\_\_  
**Recording Fee:**

**File Number:**

**State Transfer Tax:**

**County Transfer Tax:**

**Tax Parcel No.:**