

## DECLARATION OF HOMESTEAD

Assessor Parcel Number: \_\_\_\_\_

OR

Assessor's Manufactured Home ID Number: \_\_\_\_\_

*Recording Requested by and Mail to:*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**Check One:**

- |  |  |
|--|--|
| <input type="checkbox"/> Married (filing jointly)                      | <input type="checkbox"/> Married (filing individually) |
| <input type="checkbox"/> Head of Family                                | <input type="checkbox"/> Widowed                       |
| <input type="checkbox"/> Single Person                                 | <input type="checkbox"/> Multiple Single Persons       |
| <input type="checkbox"/> By Wife (filing for joint benefit of both)    |  |
| <input type="checkbox"/> By Husband (filing for joint benefit of both) |  |
| <input type="checkbox"/> Other (describe): _____                       |  |

**Check One:**

- Regular Home Dwelling/Manufactured Home     Condominium Unit     Other

**Name on Title of Property**

\_\_\_\_\_

do individually or severally certify and declare as follows:

\_\_\_\_\_

is/are now residing on the land, premises (or manufactured home) located in the city/town of \_\_\_\_\_,  
County of \_\_\_\_\_, State of Nevada, and more particularly described as follows:  
*(set forth legal description and commonly known street address OR manufactured home description)*

I/We claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, or the described manufactured home as a Homestead.

In Witness, Whereof, I/we have hereunto set my hand/our hands this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_

*Signature*

*Print or type name here*

\_\_\_\_\_

*Signature*

*Print or type name here*

STATE OF NEVADA, COUNTY OF \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_  
(date)

by \_\_\_\_\_  
*Person(s) appearing before notary*

by \_\_\_\_\_  
*Person(s) appearing before notary*

\_\_\_\_\_

*Signature of notarial officer*

**CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S  
FITNESS FOR YOUR PURPOSE.**

Notary Seal

**NOTE: Leave space within 1-inch margin blank on all sides.**

*Oct. 2009*