Affidavit for Release of Estate Tax Lien

(Date of Death after December 31, 2002)

| Name of Decedent: | Date of Death |
|--|---|
| Decedent's residence (domicile) at time | of death |
| Probate Court and Docket Number, if ar | ny |
| Re: Property located in Norfolk County a | at (street address, city/town, zip code): |
| As described by deed or certificate of tit decedent's deed, or, for registered land, | le: (Insert the date and the book and page number of certificate of title number). |
| The undersigned affiant hereby states the necessitate a Massachusetts estate tax | nat the gross estate of the decedent does not filing. |
| This affidavit is signed under the pains a | and penalties of perjury. |
| Signature | Date |
| Name of signer | Designation |
| (Examples of persons who may file the affidator remainderman after a life estate) | avit are: executor, administrator, spouse, surviving joint tenant |
| Common | wealth of Massachusetts |
| , SS. | |
| personally appearedevidence of identification, which were | , 20, before me, the undersigned notary public,, proved to me through satisfactory, to be the person whose ade oath that the foregoing statements are true and to be his/her free act and deed. |
| | Notary Public |
| | My Commission Expires: |