RECORDING REQUESTED BY:

**Provident Title Company Escrow (2448)**

**AND WHEN RECORDED MAIL TO:**

**Order No.:**

**Escrow No.:**

**A.P.N.:**

SPACE ABOVE THIS LINE IS FOR RECORDER’S USE

**DECLARATION OF ABANDONMENT**

**OF DECLARED HOMESTEAD**

The undersigned declare(s) that < - insert “he/she/they” here> hereby abandon(s) the homestead previously declared in the Homestead Declaration executed by < - insert who executed Declaration of Homestead>, on the < - insert day here> day of < - insert month here>, < - insert year here>, and recorded on < - insert recording date here>, as Instrument No. < insert Instrument No. here>, of Official Records of **Los Angeles** County, State of California, covering property described as:

**<LEGAL>**

Dated:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A notary public or other officer completing this certificate | | |  |  |  |  |  |
| verifies only the identity of the individual who signed the | | |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| document to which this certificate is attached, and not the | | |  |  |  | . |  |
| truthfulness, accuracy, or validity of that document. | | |  |  |  |  |  |
| STATE OF CALIFORNIA | | | |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| } | SS. | . |  |
| COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |  |
|  |  |
| On \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ before me, | | | |  |  |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a notary public, | | | |  |  |  |  |
| personally appeared |  |  | |  |  |  |  |
|  | | , |  |  |  |  |  |
| who proved to me on the basis of satisfactory evidence to be the | | | |  |  |  |  |
| person(s) whose name(s) is/are subscribed to the within | | | |  |  |  |  |
| instrument and acknowledged to me that he/she/they executed | | | |  |  |  |  |
| the same in his/her/their authorized capacity(ies), and that by | | | |  |  |  |  |
| his/her/their signature(s) on the instrument the person(s), or the | | | |  |  |  |  |
| entity upon behalf of which the person(s) acted, executed the | | | |  |  |  |  |
| instrument. | | | |  |  |  |  |
| I certify under PENALTY OF PERJURY under the laws of the | | | |  |  |  |  |
| State of California that the foregoing paragraph is true and correct. | | | |  |  |  |  |
| WITNESS my hand and official seal. | | | |  |  |  |  |
| Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |  |  |  |  |
|  | Signature of Notary | | |  |  | (Seal) |  |

(This area for official notarial seal)