

# CERTIFICATE OF TRUST

UPON OATH, IT IS HEREBY CERTIFIED that:

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

Social Security Number: \_\_\_\_\_

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

Social Security Number: \_\_\_\_\_

is/are entitled to the use and occupancy as to an equitable life estate in the real property under the terms of the:

Name of Trust: \_\_\_\_\_

Dated: \_\_\_\_\_

and therefore hold sufficient title to claim a Homestead Exemption in compliance with Section 196.041(2), Florida Statutes; and Rule 12D-7.011, Florida Administrative Code, on the property set forth below:

Property Identification #: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF TRUSTEE

\_\_\_\_\_  
PRINTED NAME OF TRUSTEE

State of \_\_\_\_\_

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

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 201\_\_, by \_\_\_\_\_, who is personally known by me or produced as identification, and who did take an oath.

(SEAL)

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Print Name

