

TITLE CERTIFICATION AND LIEN DISCLOSURE

The undersigned attorney at law for the owners of the property (the "Property") to be subdivided as shown on a proposed plat of subdivision entitled

_____ ,

dated _____, 20__, prepared by _____

(the "Plat"), hereby certifies, as required by Sections 20.5-48 and 20.5-58, Code of the County of York, that title to the property is in the name of (state the full legal name of all owners):

_____ .

The Property was acquired by the owners by instrument(s) of record in the Clerk's Office of the York-Poquoson Circuit Court in York County, Virginia, in Deed Book(s) & page number(s): DB ___ PG ___, DB ___ PG ___ or Instrument No(s): No. _____, No. _____

I further certify that there are as of the date of this certification no deed restrictions or covenants of record, title defects, or encumbrances affecting, or potentially affecting, any portion of the Property proposed to be dedicated to public use on the Plat, other than the following: _____

(Attach copies of relevant documents.)

I further certify that the following are all of the deeds of trust on the Property:

Deed of Trust No. 1

1. **Date of deed of trust:** _____

2. **Amount of deed of trust:** _____

3. **Recordation Reference:** **Deed Book** _____ **Page** _____
Instrument No. _____

4. **Name of beneficiary (bank, etc.):** _____

5. **Trustees:**
Full legal name(s) of all individual trustee(s): _____

If more than one trustee, does either individual have the power to act for both? **Yes** ____ **No** ____
Not applicable, only one trustee ____

OR

If trustee is a business entity, indicate the full legal name of the business entity: _____

List the full legal name(s) and title(s) of the *authorized* individual(s) who can sign on behalf of the trustee.

Deed of Trust No. 2

1. **Date of deed of trust:** _____

2. **Amount of deed of trust:** _____

3. **Recordation Reference:** **Deed Book** _____ **Page** _____
Instrument No. _____

4. **Name of beneficiary (bank, etc.):** _____

5. **Trustees:**
Full legal name(s) of all individual trustee(s): _____

If more than one trustee, does either individual have the power to act for both? **Yes** ____ **No** ____
Not applicable, only one trustee ____

OR

If trustee is a business entity, indicate the full legal name of the business entity: _____

List the full legal name(s) and title(s) of the *authorized* individual(s) who can sign on behalf of the trustee.

Deed of Trust No. 3

1. **Date of deed of trust:** _____

2. **Amount of deed of trust:** _____

3. **Recordation Reference:** **Deed Book** _____ **Page** _____
Instrument No. _____

4. **Name of beneficiary (bank, etc.):** _____

5. **Trustees:**
Full legal name(s) of all individual trustee(s): _____

If more than one trustee, does either individual have the power to act for both? **Yes** ____ **No** ____
Not applicable, only one trustee ____

OR

If trustee is a business entity, indicate the full legal name of the business entity: _____

List the full legal name(s) and title(s) of the *authorized* individual(s) who can sign on behalf of the trustee. _____

Deed of Trust No. 4

1. **Date of deed of trust:** _____

2. **Amount of deed of trust:** _____

3. **Recordation Reference:** **Deed Book** _____ **Page** _____
Instrument No. _____

4. **Name of beneficiary (bank, etc.):** _____

5. **Trustees:**
Full legal name(s) of all individual trustee(s): _____

If more than one trustee, does either individual have the power to act for both? **Yes** ____ **No** ____
Not applicable, only one trustee ____

OR

If trustee is a business entity, indicate the full legal name of the business entity: _____

List the full legal name(s) and title(s) of the *authorized* individual(s) who can sign on behalf of the trustee. _____

Please add an additional sheet(s) if there are further deeds of trust.

Attorney Information

Attorney Signature: _____ **Date:** _____

Printed Full Name: _____

Address: _____

Telephone: _____

Email Address: _____