

DECLARATION OF HOMESTEAD

Disabled Person

Name _____

___unmarried

___married to each other

___married to _____

___ A. Who also occupies the premises as his/her principal residence.

___ B. Who does not occupy the premises as his/her principal residence.

Being a disabled person and owning and occupying as my/our principal residence the home at:

Street Address

City/Town

State

Zip Code

Norfolk County, Massachusetts

Owned

By Deed Recorded in BOOK _____ PAGE _____
NORFOLK REGISTRY OF DEEDS.

By Certificate of Title # _____ in NORFOLK REGISTRY DISTRICT OF THE
LAND COURT.

Inheritance from _____ Probate Court No. _____

As a cooperative housing unit established under Massachusetts General Laws

As a manufactured home as defined in Massachusetts General Law Chapter 140, Section 320

hereby declare a homestead as a disabled person in said premises under the provisions of Chapter 188, Section 2 of the General Laws of Massachusetts.

Attached hereto is the documentation required under said statute that qualifies for disabled homestead protection

Executed as sealed instrument under the penalties of perjury

this _____ day of _____, 20____ year
date month year

Signature Owner _____

Signature Owner _____

Commonwealth of Massachusetts

County _____ SS

On this _____ day of _____, 20_____, before me, the undersigned
date month year
notary public, personally appeared

_____, _____,
Print Name of Document Signer Print Name of Document Signer

who proved to me through satisfactory evidence of identification, which was/were

_____, to be the person(s) who signed the preceding or attached
Driver's License(s)/Passport(s)
document in my presence, and acknowledged that the signature was his/her free act and deed.

Notary Public
My Commission Expires: _____

Norfolk County Registry of Deeds, 649 High Street, Dedham MA 02026-1831
Norfolk County Register of Deeds, William P. O'Donnell