



## COUNTY OF LEXINGTON REGISTER OF DEEDS

212 South Lake Drive, Suite 301, Lexington, South Carolina 29072  
Telephone (803) 785-8168 Fax (803) 785-8189  
www.lex-co.sc.gov

**TINA GUERRY**  
**REGISTRAR**

**THE INFORMATION CONTAINED IN THIS DEED OF DISTRIBUTION PACKET IS INTENDED ONLY AS A GUIDE. IF YOU NEED LEGAL ADVICE, YOU WILL NEED TO REACH OUT TO AN ATTORNEY.**

The first step in the process is to find or have someone assist you in finding the deed so you are able to obtain a copy.

The following numbers all correspond to numbers on the attached sample deed.

1. Fill in the legal name of the deceased person
2. Provide the Probate Court Estate file number
3. If the title has not been examined by an attorney, complete this by filling in, "NO TITLE EXAM"
4. If the property location is in another County, (i.e. Richland County) indicate here
5. Provide the Date of Death for the deceased
6. Provide the date of the appointment for the Personal Representative
7. The Tax Map number can be obtained through our office, Register of Deeds, 3<sup>rd</sup> floor of the Lexington County Administration Building or the Assessor's Office which is located on the 2<sup>nd</sup> floor of the Lexington County Administration Building
8. Provide the physical address of the property
9. This section is for the property description; this description usually begins with "All the certain piece...". The description may be copied from the deed you originally obtained when you began this process. Please ensure the verbiage is copied word for word.
10. Derivation- Information from decedent's deeds as to how they acquired the property.
11. This transfer is made pursuant to: Check the applicable box
12. This should include the name of each person who is inheriting the property. If an additional sheet is needed this is permissible. *If the spouse is inheriting, please indicate by writing "SPOUSE" next to name.*
13. Provide name of deceased person
14. The Personal Representative will sign here as well as write or type "*Personal Representative*" under the signature.

15. If there is a co-representative they should sign and print name here.

16. Two witnesses need to sign for the signature of the Personal Representative.

17. Acknowledgement – The Personal Representative’s signature will also need to be notarized by a notary.

Bring the completed document with an additional copy to the Register of Deeds office to be recorded. The fee to record this document is \$10.00. A self-addressed stamped envelope will need to be provided as well.

**THE INFORMATION CONTAINED IN THIS PACKET IS INTENDED ONLY AS A GUIDE**

*A \$10.00 filing fee and a self-addressed envelope will be required by the Register of Deeds*

STATE OF SOUTH CAROLINA	)	IN THE PROBATE COURT
	)	<b>SAMPLE</b>
COUNTY OF LEXINGTON	)	<b>DEED OF DISTRIBUTION</b>
	)	<b>(Real Property Only)</b>
IN THE MATTER OF:	)	<b>NOT A WARRANTY DEED</b>
<u>NAME OF DECEDENT</u>	)	
(Decedent)	)	CASE NUMBER: <u>20 - ES-32-</u>

The undersigned states as follows:

Decedent died on DATE OF DEATH; and probate of the Estate is being administered in the Probate Court for Lexington County, South Carolina, in File #PROBATE COURT CASE NUMBER.

I/We was/were appointed Personal Representative (s) on DATE THE PERSONAL REPRESENTATIVE WAS APPOINTED.

Decedent owned real property described as follows:

Tax Map Number: TMS# OR PARCEL ID# THIS CAN BE OBTAINED THROUGH THE REGISTER OF DEEDS OFFICE OR ASSESSOR'S OFFICE

Street/Property Address: PHYSICAL ADDRESS OF PROPERTY THIS CAN BE LOCATED ON YOUR TAX BILL OR PROPERTY CARD

Legal Description: THE PROPERTY DESCRIPTION, USUALLY BEGINS WITH "ALL THAT CERTAIN PIECE OR PARCEL OF LAND....." This can be found on the decedent's deed. This description needs to be copied word for word, if not this may cause problems transferring the property. You may also attach a copy of the legal description.

*THE DERIVATION TELLS US FROM WHERE THE DECEDENT OBTAINED THE PROPERTY, CAN BE FOUND ON THE DECEDENT'S DEED*

**DERIVATION:**

This being the same property conveyed to Grantor from \_\_\_\_\_ recorded \_\_\_\_\_ and filed in Record Book \_\_\_\_\_ at Page \_\_\_\_\_.

Additional sheet(s) for additional property(ies) is attached (check if applicable) *PLEASE CHECK IF ADDITIONAL SHEETS ARE ATTACHED FOR ADDITIONAL PROPERTIES*

This transfer is made pursuant to: *PLEASE CHECK THE APPROPRIATE BOX (Please contact Your Probate Court Clerk for questions concerning which box to check)*

- Decedent's Will
- Intestacy Statute: SCPC 62-2-103
- Private Family Agreement: SCPC 62-3-912
- Disclaimer by: \_\_\_\_\_
- Probate Court Order issued on \_\_\_\_\_
- Other: \_\_\_\_\_

In accordance with the laws of the State of South Carolina, the Personal Representative(s) does/do hereby release all of the Personal Representative's(s') right, title and interest, including statutory and/or testamentary powers, over the real property described to the beneficiaries named below: *LIST ALL INDIVIDUALS RECEIVING PROPERTY*

Name: NAME OF PERSON RECEIVING PROPERTY  
Address: ADDRESS OF PERSON RECEIVING PROPERTY  
**(IF SPOUSE, PLEASE WRITE SPOUSE NEXT TO NAME)**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_

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

Additional sheet(s) for names of additional beneficiaries is attached (check, if applicable)

IN WITNESS WHEREOF the undersigned, as Personal Representative(s) of the above Estate, has executed this Deed of Distribution, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

SIGNED, SEALED AND DELIVERED  
IN THE PRESENCE OF:

Witness: \_\_\_\_\_  
*1<sup>ST</sup> WITNESS*  
Print Name: \_\_\_\_\_

Witness : \_\_\_\_\_  
*2<sup>ND</sup> WITNESS (NOTARY)*  
Print Name: \_\_\_\_\_

Estate of: NAME OF DECEDENT  
Signature of Personal Representative: Signature of Personal Representative  
Print Name: Printed name of Personal Representative

**If applicable,**  
Signature of Co-Personal Representative: Signature of CoPersonal Representative  
Print Name: Printed name of CoPersonal Representative

STATE OF SOUTH CAROLINA )  
  )  
COUNTY OF LEXINGTON    )

ACKNOWLEDGMENT

I, PRINTED NAME OF THE NOTARY, Notary Public, a notary for the State of South Carolina do hereby certify that PRINTED NAME OF THE PERSONAL REPRESENTATIVE(S), as Personal Representative(s) of the Estate of NAME OF DECEDENT, personally appeared before me this day and acknowledged the due execution of the foregoing Deed of Distribution.

Witness my hand and seal this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Signature of Notary Public) (SEAL)  
\_\_\_\_\_  
(Print name of Notary Public)  
Notary Public for State of South Carolina  
My Commission Expires: \_\_\_\_\_

**\*\*Note: It is recommended that an attorney prepare this document and determine if a title examination is necessary.**