## **Identity Affidavit**

Proper completion of this form will help you by enabling the title company to eliminate title problems that might arise through similarity of your name with the names of other persons against whom there may be judgments, tax liens, or other matters affecting property ownership.

PROPERTY ADDRESS:				
Full Name:				
Date of Birth:	Birthplace:	Birthplace:		
Lived in WA State Since:	SSN: XXX-XX-			
Driver's License Number:				
Full Name of Spouse:				
Spouse's Date of Birth:	Spouse's Birthplace:	Spouse's Birthplace:		
Spouse Lived in WA State Since:	Spouse's SSN: XXX-XX-	Spouse's SSN: XXX-XX-		
Spouse's Maiden Name:				
Spouse's Driver's Licencse Number:				
Marriage Date:	Marriage Location:			
RESIDENCES During Preceding 10 Years				
OCCUPATIONS: Employer Name	Address	No. of Years		
Undersigned:				
Spouse:				

Former Marriage(s): (If no former marriages, write "None")						
Name of Form	er Spouse:					
Deceased (dat	e)	Divorced (date)	Where			
FOR SELLERS C	DNLY:					
I have owned t	his property for	years				
	n any work of improven Name of Contractor: Nature of Improveme	nent on the property within	the last 6 months? YES	NO		
pendir	ng court proceedings, in	ncluding bankruptcies or dis	ens or warrants against me/us, solution or name change procent to the best of my knowledge	eedings,		
Signature		 				