

LINCOLN COUNTY, NV

2023-165796

Rec:\$37.00

Total:\$37.00

07/26/2023 10:12 AM

PETER A ROBINSON

Pgs=6 KC



00012834202301657960060068

OFFICIAL RECORD
AMY ELMER, RECORDER

E10

A.P.N.

:

Parcel, Number.1-250-12, And, Parcel,
Number 250-12, *1-250-13*

PAR

WHEN RECORDED MAIL TO
and MAIL TAX STATEMENTS TO
:

Peter A Robinson
P O Box 581
Pioche, Nevada 89043

Space
for
'
s

Above

Recorder

Use

(NRS 247.110(3)(c))

DEED UPON DEATH

(
Authorized under Nev. Rev. Stat. § 111.671
)

I, Peter A Robinson, a divorced and currently unmarried man, with an address of P O Box 581, Pioche, Nevada 89043 (the "Grantor") hereby convey

to Scott A Robinson, a man, with an address of P O Box 581, Pioche, Nevada 89043 and Andrew T Robinson, a man, with an address of 116-60, Jamaica, New York 11436

as joint tenants with right of survivorship

(collectively, the "Designated Beneficiaries"), effective on my death, all right, title and interest in the real property located in Lincoln County, Nevada, and more particularly described as (the "Property"):

All of the property described in the Parcel Map on file as Plat-A, Page 449, Parcel 1 D ((Amended), Parcel 2 B of the Parcel Map of the 1/4 of the NE 1/4 of Sec. 14, TIN, R67E. M.D.N , Lincoln County, Nevada, Recorder

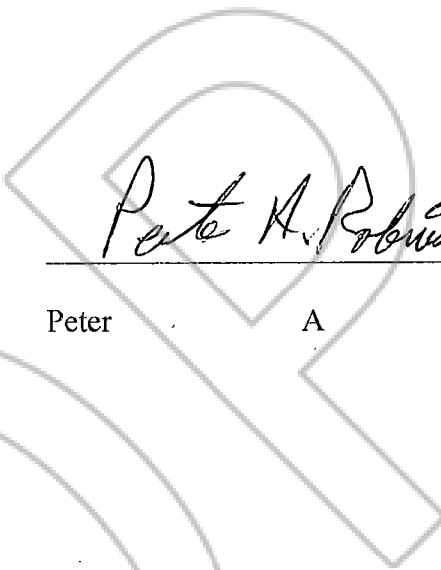
Together with all improvements, tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

If, on the Grantor's death, this Deed Upon Death transfers the Property to more than one natural person, all natural persons who are Designated Beneficiaries will hold title as joint tenants with right of survivorship.

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR(S). THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR(S) WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTOR(S) IN THE SAME REAL PROPERTY.

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

Signed by the Grantor, Peter A Robinson, on July 26 2023 ~~July 26 2022~~



Peter A. Robinson

Peter A Robinson

STATE OF NEVADA

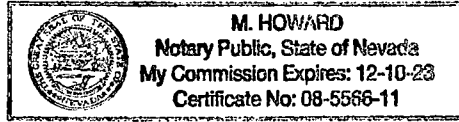
CITY/COUNTY OF Lincoln

Subscribed and sworn to on this
26th day of July, 2023
, before me,

Mercedes Howard

(here insert name of notary public), by
Peter A Robinson

M. Howard
Notary Public



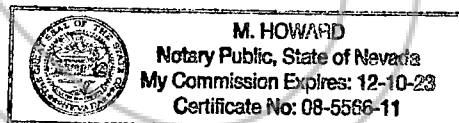
On this
26th day of July, 2023
, before me,

Mercedes Howard

(here insert name of notary public), personally appeared
Peter A Robinson

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose
name is subscribed to this instrument, and acknowledged that
~~she~~ he
executed it.

M. Howard



NOTARY SEAL

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 1-250-12
 b) 1-250-13
 c) _____
 d) _____

2. Type of Property:
 a) Vacant Land b) Single Fam. Res.
 c) Condo/Twnhse d) 2-4 Plex
 e) Apt. Bldg f) Comm'l/Ind'l
 g) Agricultural h) Mobile Home
 Other _____

FOR RECORDER'S OPTIONAL USE ONLY	
Book: _____	Page: _____
Date of Recording: _____	
Notes: _____	

3. Total Value/Sales Price of Property \$ _____
 Deed in Lieu of Foreclosure Only (value of property) (_____)
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due \$ _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 1D
 b. Explain Reason for Exemption: TRANSFER UPON DEATH TO my
SONS

5. Partial Interest: Percentage being transferred: 100 %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Peter M. Robinson Capacity GRANTOR
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)
 Print Name: Peter A. Robinson
 Address: PO Box 581
 City: Pioche
 State: NEVADA Zip: 89043

(REQUIRED)
 Print Name: SEE ATTACHED
 Address: _____
 City: _____
 State: _____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: _____ Escrow #: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Grantee Info

Scott A. Robinson
Po Box 524
Proche, NY 99043

Andrew T. Robinson
116-60 144th St
Jamaica NY 11436

