Filing Fee \$35

The Commonwealth of Massachusetts CHERYL A COAKLEY-RIVERA, ESQ., REGISTER

www.hampdendeeds.com

Hampden County Registry of Deeds

Declaration of Homestead for Homes owned by Natural Persons (General Laws Chapter 188)

In situations where the home is owned by multiple owners, each owner may be best served to complete a separate declaration of homestead.

All applicants should seek the advice of an attorney prior to filling out and recording a Declaration of Homestead. The Hampden County Registry of Deeds assumes no liability with regard to the accuracy or validity of the content in this Declaration of Homestead.

I/we, hereby declare homestead pursuant to M.G.L. c.188 and state that I/we own the home described below and occupy or intend to occupy the home as my/our principal residence.

Choose one of the following from section 1. or 2., not both.

•	Under 62 years of age:	
Ι, _		_ ,
	(Print name of owner under 62 years of age)	
We	(Print name of owners under 62 years of age)	_ ,
	(Print name of owners under 62 years of age)	
n m	arried too-owner of the home but who occupies or intends to occupy the home as his/her principal residence.	_ , who
a co	o-owner of the home but who occupies or intends to occupy the home as his/her principal residence.	
	Over 62 years of age:	
I/we		_
	(Print name of owner(s) over 62 years of age)	,
	Disabled:	
I/we	(Print name of disabled person(s)	,
	(Print name of disabled person(s)	
	am/are disabled (have a physical or mental impairment that meets the disability requirements for Supp Security Income under 42 U.S.C. 1382c(a)(3)(A) and 42 U.S.C. 1382c(a)(3)(C). One of the following attached: 1) an original or certified copy of a disability award letter issued to the person by the United Social Security Administration, or 2) a letter signed by a physician registered with the board of registr medicine certifying that each person meets the disability requirements stated in 42 U.S.C 1382c(a)(3)(U.S.C. 1382c(a)(3)(C).	must States ation i

am/are servicemember(s) who may be subject to protection under the servicemember(s) Civil Relief Act, 50 U.S.C. 553, should I/we be called to active duty.

I am married to, who not a co-owner of the home but who occupies or intends to occupy the home as his/her principal residence.) is
	neatte
3. Property Address, Massachu (Street number and name, city/town)	uscus
4. Select ONE of the following:	
☐ Deed is recorded in Hampden County Registry of Deeds in Book, Page	
☐ Inheritance Docket #	
☐ Divorce Docket #	
☐ Certificate of Title # registered in the Land Registration Office.	
☐ For manufactured homes, list serial #	
5. I/we, whose name(s) are signed on this document, acknowledge that I/we sign it voluntarily for its stated purpose).
To be signed by Applicant(s) in front of Notary Public.	
Signed under pains and penalties of perjury this	
does of 20	
day of , 20	
(Signature of owner) (Printed Name)	
(Signature of owner) (Printed Name)	
For use by Notary Public Only:	
Commonwealth of Massachusetts	
, SS.	
(County where signed)	
, 20, before me, the undersigned notary public, personally appeared	
(Print name of document signer(s)	
Proved to me through satisfactory evidence of identification, which were, (Drivers license, passport, etc)	
(Drivers license, passport, etc) to be the person(s) who signed the preceding or attached document and acknowledged to me that (he) (she) (they) significantly for its stated purpose.	gned
Notary Public Signature:	
Printed Name	
My commission expires:	