

**CERTIFICATE OF TRUST**

STATE OF MICHIGAN ( )

COUNTY OF \_\_\_\_\_ )

The undersigned, being first duly sworn, is executing this Certificate of Trust as the settlor ( ), the attorney for the settlor ( ), or the attorney for the trustee ( ) and says that:

1. TITLE OF TRUST. The name of the trust is:
2. DATE OF TRUST. The date of the trust is:
3. AMENDMENTS TO TRUST. The trust has ( ) has not ( ) been amended. If the trust has been amended, the title and date is:
4. SETTLOR(S). The name and address of each settlor is:  
Name:  
Address:  
Name:  
Address:
5. TRUSTEE(S). The name and address of each trustee is:  
Name:  
Address:  
Name:  
Address:
6. SUCCESSOR TRUSTEE(S). The name and address of each successor trustee is:  
Name:  
Address:  
Name:  
Address:
7. CURRENT TRUSTEE(S). The name and address of each trustee currently acting for the trust is:  
Name:  
Address:  
Name:  
Address:
8. LEGAL DESCRIPTION. The legal description of the real property affected by this Certificate of Trust is attached as Exhibit A.
9. SETTLOR'S RESERVED POWERS. Settlor has ( ) has not ( ) reserved the power to amend or revoke the trust agreement and has ( ) has not ( ) reserved the power to withdraw trust property. A verbatim reproduction of each power is attached to this Certificate of Trust.

10. TRUSTEE'S POWER OVER REAL ESTATE. The trustee has power to sell ( ) and/or mortgage ( ) real estate including the power to execute all necessary documents. A verbatim reproduction of each power is attached to this certificate of Trust.

11. GOVERNING LAW. The trust agreement, and any amendment, is governed by the laws of the State of Michigan.

12. FULL FORCE AND EFFECT. The trust agreement, and any amendment, remains in full force and effect.

13. RELIANCE: This certificate of trust correctly recites the correct status of the trust agreement and is made in accordance with the provisions of MCLA 565.431 *et seq.* in order to induce Lawyers Title Insurance Corporation to issue a title insurance policy insuring an interest in the real property affected by the trust agreement.

THIS IS A LEGAL DOCUMENT AND AN ATTORNEY SHOULD BE CONSULTED.

Dated: \_\_\_\_\_, 2\_\_\_\_

**Signed in the presence of**

**Signed by**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

STATE OF \_\_\_\_\_ )

\_\_\_\_\_ COUNTY )

Subscribed and sworn to before me on \_\_\_\_\_, 2\_\_\_\_ by \_\_\_\_\_

\_\_\_\_\_

Notary Public, \_\_\_\_\_ County  
My commission expires \_\_\_\_\_.  
Acting in the County of \_\_\_\_\_.

**When recorded return to**

**Drafted by**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_