

Tax Map Parcel No.: \_\_\_\_\_

Prepared by and return to:

Office of County Attorney  
P. O. Box 1309  
Gloucester, Virginia 23601

Exempt from TTF pursuant to 17.1-279

NOTE: This instrument is exempt from certain recordation taxes pursuant to Virginia Code Section 58.1-811.A.3.

### GENERAL WARRANTY DEED

THIS GENERAL WARRANTY DEED is made this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, by and between \_\_\_\_\_ (hereinafter called "Grantor") and a grantor for purposes of indexing; and the COUNTY OF GLOUCESTER (hereinafter called "Grantee") and a grantee for purposes of indexing, the mailing address of which is: P. O. Box 1309, Gloucester, Virginia 23061.

### WITNESSETH:

THAT for and in consideration of the sum of TEN DOLLARS (\$10.00), cash in hand paid, and other good and valuable consideration paid by Grantee to Grantor, the adequacy and receipt of which is hereby acknowledged, Grantor does hereby grant and convey with GENERAL WARRANTY and ENGLISH COVENANTS OF TITLE unto Grantee, the following described premises, together with the improvements thereon and the appurtenances thereunto belonging (the "Property"):

The above-described Property is conveyed subject to the reservations, covenants, conditions, restrictions, easements and other matters, if any, duly of record and constituting constructive notice.

IN WITNESS WHEREOF, Grantor has hereunto set its hand and seal as of the day and year first written above.

GRANTOR:

\_\_\_\_\_

COMMONWEALTH OF VIRGINIA  
CITY/COUNTY OF \_\_\_\_\_, to-wit:

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by

\_\_\_\_\_

.

\_\_\_\_\_

Notary Public

My commission expires: \_\_/\_\_/\_\_\_\_  
Registration No.: \_\_\_\_\_

Approved as to form:

\_\_\_\_\_  
County Attorney

COUNTY OF GLOUCESTER, VIRGINIA

By: \_\_\_\_\_  
Chair, Gloucester County Board of Supervisors

COMMONWEALTH OF VIRGINIA  
County of Gloucester, to-wit:

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 200\_, by \_\_\_\_\_, Chair, Gloucester County Board of Supervisors.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_/\_\_/\_\_\_\_\_  
Registration No.: \_\_\_\_\_