

DATE:	ORDER NO:	ESCROW NO:
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**CERTIFICATION OF TRUSTEES UNDER TRUST**

(California Probate Code Section 18100.5)

*(Name of person(s) making Certification)*

❶ Declarant(s) certify the existence of the following described Trust and state that he/she/they are **all** of the current Trustees:

Name of Trust: \_\_\_\_\_  
 Date of Trust: \_\_\_\_\_  
 Trustor/Settlor(s): \_\_\_\_\_  
 Original Trustee(s): \_\_\_\_\_  
 Trust Identification #/Social Security #/Tax ID #: \_\_\_\_\_

❷ Declarant(s) state(s) that the Trust is in full force and effect and has not been revoked, terminated, or otherwise amended in any manner which would cause the representations in this Certification to be incorrect. The name(s) of all persons who have any power to revoke the Trust are:

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

❸ That the Trustee(s) have the following powers which may be exercised by the Trustee(s) **by initialing the appropriate line:**

_____	_____	Power to acquire additional property?
_____	_____	Power to sell and convey?
_____	_____	Power to encumber and execute Trust Deeds?
_____	_____	Power to lease?

❹ Declarant(s) state(s) that to the best of his/her/their knowledge, there are no claims, challenges of any kind or causes of action alleged, contesting or questioning the validity of the Trust or the Trustee's authority to act for the Trust.

❺ This Declaration is prepared and executed pursuant to California Probate Code Section 18100.5.

**SIGNED UNDER PENALTY OF PERJURY, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 19\_\_\_\_.**

\_\_\_\_\_  
*Signature of Trustee*

\_\_\_\_\_  
*Signature of Trustee*

\_\_\_\_\_  
*Name Typed or Printed*  
 Address: \_\_\_\_\_

\_\_\_\_\_  
*Name Typed or Printed*  
 Address: \_\_\_\_\_

**THIS DOCUMENT REQUIRES YOUR SIGNATURES TO BE NOTARIZED BY A NOTARY PUBLIC**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

\_\_\_\_\_  
*(Signature of Notary Public)*

*(This area for Notary Seal)*