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| Prepared by:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_​​  Iconic Title Agency LLC​​  1815 Lakewood Road Suite 127 Toms River, NJ 08755​​  Incidental to the issuance of a title insurance policy  Please return to:  ​​  \_\_\_\_\_\_\_\_\_\_​​  File No: | |  |
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**CONTINUOUS MARRIAGE AFFIDAVIT**

**THIS IS AN AFFIDAVIT MADE UNDER OATH. THE MAKING OF A FALSE STATEMENT WILL SUBJECT THE AFFIANT TO SEVERE CRIMINAL PENALTIES.**

STATE OF NEW JERSEY​​ )

COUNTY OF ​​ )

BEFORE ME, the undersigned authority, duly authorized to take acknowledgments and administer oaths, personally appeared ​​ (hereinafter referred to as the “Affiants”), who depose and say under penalties of perjury that:

1. This Affidavit is made with regard to that certain real property located in ​​ County, \_\_\_\_\_​​ (hereinafter referred to as the "Property") as more particularly described as follows:

See Exhibit “A” attached hereto and made a part hereof

commonly referred to as ​​.

2. Affiants are the fee simple owners of the Property.

3. Affiants hereby affirm that the Property was acquired by them during their marriage and that they have remained married to each other without interruption, from a date prior to \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_​​, the date of the Warranty Deed recorded in Official Records Book ​​, at Page ​​, of the Public Records of ​​ County, \_\_\_\_\_​​, through the date hereof.

4. This Affidavit is made to induce \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_​​ (the “Title Insurer”) to insure title to the Property. Affiants agree to indemnify the Title Insurer and hold it harmless from any loss or damage resulting from its reliance on the matters set forth in this Affidavit.

FURTHER Affiants say naught.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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| STATE OF NEW JERSEY COUNTY OF OCEAN  On 9th day of June, 2021, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Notary Public in and for said county, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who has/have satisfactorily identified him/her/themselves as the signer(s) or witness(es) to the above-referenced document.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notary Public Signature  My Commission Expires:​​ |