Karen Johnson Davidson County
Batch# 1053728 AFFIDAVITH
09/25/2023 11 29 20 AM 4 pgs
Fees $22 00 Taxes $0 00
20230925-0075073

This instrument was prepared by:
Attorney Edward T. Kindall
2512 Scovel Street
Nashville, Tennessee 37208

GRANTEE(S): JONATHON NORMAN

SEND TAX NOTICES TO: 1600 BUCHANAN STREET, NASHVILLE, TENNESSEE 37208

MAP PARCEL NUMBER: 081 11 0 212.00

AFFIDAVIT OF HEIRSHIP

Tennessee Code Annotated § 30-2-712.

STATE OF TENNESSEE

COUNTY OF DAVIDSON

The undersigned, being duly sworn, deposes and says:

1. My full name is Rebecca Ann Norman, hereinafter referred to as the Affiant in this Affidavit.

2. I reside at 653 Granwood Blvd, Old Hickory, Tennessee 37138.

3. I have personal knowledge of the matters stated in this Affidavit and have known the Decedent for over 15 years.

4. On *August 28,2023*, Terry J. Norman, unmarried died at 115 Great Circle Rd. Apt.104, Nashville, Tennessee 37228. Referred to as the Decedent in this Affidavit.

5.The real property to which this Affidavit applies is located at 1600 Buchanan Street in Nashville Davidson County, Tennessee, more fully described as:

Being Lots Nos. 4 and 5 on the Map of W. M. Butler's Subdivision, of record in Book 57, page 98, Register's Office for said County.

Said Lot No. 4 fronts 52.2 feet on the northerly side of Buchanan Street, formerly Hydes Ferry Pike, and runs back 184.5 feet, more or less, on the westerly line and 202 feet on the easterly line, with the westerly margin of 16th Avenue North, formerly Butler Street, to an alley measuring 48.2 feet thereon.

Said Lot No. 5 fronts 52.2 feet on the northerly side of Buchanan Street, formerly Hydes Ferry Pike and runs back between lines 163 feet, more or less, on the westerly line and 179 feet on the easterly line to an alley, measuring 48.2 feet thereon.

Being the same property conveyed to Terry Norman by Quitclaim Deed from Joe M.

Haynes, Trustee of the Norman Family Trust recorded as **Instrument No 20160108-001900** in said Register of Deeds Office, Nashville Davidson County, Tennessee.

This is improved property known as: 1600 Buchanan Street, Nashville, Tennessee 37208

6. At the time of the Decedent's death, the Decedent resided at 115 Great Circle Rd. Apt 104, Nashville Davidson County, Tennessee 37228. Decedent owned real property located at 1600 Buchanan Street, Nashville Davidson County, Tennessee 37208, solely at the time of his death.

7. The estate of the Decedent
   X Was not administered in a proceeding supervised by a court.
   __ Was administered in a proceeding supervised by a court in _____ [*county and state*] in the _____ [*court*] in case no. _____.

8. Facts concerning my relationship to the Decedent are: The Affiant is the daughter-in-law of the Decedent and has known the Decedent for over 15 years.

9. The Decedent died intestate living no will.

   Jonathon Norman, adult son is the only child of the decedent and the sole surviving heir of this estate by intestate succession.

_____
Affiant

Sworn to and subscribed before me this 25 day of Sept. 2023.

My Commission expires: 7-7-2025

_____
Notary Public

MARIE HAWKINS
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY

STATE OF TENNESSEE
Office of Vital Records

SAMPLE

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2023 052902

1 Decedent's Legal Name: TERRY J NORMAN		2. Sex: MALE	3 Date of Death: 08/28/2023
4 Time of Death (Approx.): 10 19 AM	5a Age: 69	6 Date of Birth: 03/18/1954	7 Birthplace: NASHVILLE, TN
8a Place of Death: RESIDENCE			
8b Facility Name: 115 GREAT CIRCLE RD APT 104		8c City or Town: NASHVILLE	8d County of Death: DAVIDSON
9 Marital Status: DIVORCED	10 Surviving Spouse (name prior to first marriage):	11a. Decedent's Usual Occupation: RETAIL OWNER	11b. Kind of Business/Industry: RETAIL
12. Social Security Number: -4998	13a Residence-State or Foreign Country: TENNESSEE	13b County: DAVIDSON	13c City or Town: NASHVILLE
13d Street and Number: 115 GREAT CIRCLE RD 104	13e Inside City Limits?: YES	13f. Zip Code: 37228	14 Was Decedent ever in US Armed Forces?: NO
15. Decedent's Education: HIGH SCHOOL GRADUATE OR GED COMPLETED	16 Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO	17 Decedent's Race: WHITE	
18 Father's Name: EDWARD NORMAN		19 Mother's Name Prior to First Marriage: DAPHNEY RAY GREGORY	
20a Informant's Name: JONATHON NORMAN	20b Relationship to Decedent: SON	20c. Mailing Address: 653 GRANSWOOD BLVD, OLD HICKORY, TN 37138	
21a Method of Disposition: CREMATION	21b Place of Disposition: S A G FUNERAL HOME	21c Location: NASHVILLE TN	
22a Signature of Funeral Director: ▶ /e/ RHONDA W GANAWAY	22b License Number: 4038	22c Signature of Embalmer: ▶ /e/ TROY M BROADY	22d License Number: 4047
23a Name and Address of Funeral Home: SAG FUNERAL HOME, 1503 BUCHANAN STREET, NASHVILLE, TN 37208-1405			23b. License Number: 1206
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III		25 Date Filed: 09/01/2023	

26. Certifier

26a ☐ PHYSICIAN – TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE DATE, TIME, AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER STATED

26b ☒ MEDICAL EXAMINER – ON THE BASIS OF EXAMINATION, AND/OR INVESTIGATION IN MY OPINION, DEATH OCCURRED AT THE DATE TIME, AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER STATED

27a Certifier: ▶ /e/ ERIN M CARNEY, M.D	27b License Number: 50160	27c Date Signed: 08/30/2023
27d Name and Address: ERIN M CARNEY, M D 850 R S GASS BLVD, NASHVILLE, TN 37216		

28 Part I ENTER THE CHAIN OF EVENTS (DISEASES, INJURIES, OR COMPLICATIONS) THAT DIRECTLY CAUSED THE DEATH. DO NOT ENTER TERMINAL EVENTS SUCH AS CARDIAC ARREST, RESPIRATORY ARREST, OR VENTRICULAR FIBRILLATION WITHOUT SHOWING THE ETIOLOGY. ENTER ONLY ONE CAUSE ON A LINE

Approximate Interval Onset to Death

IMMEDIATE CAUSE (Final disease or condition resulting in death) Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST

a PENDING

b

c.

d

Part II OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I

29a. Was an Autopsy Performed?

29b Were Autopsy Findings Available to Complete the Cause of Death?

30 Manner of Death: PENDING INVESTIGATION	31 Did Tobacco Use Contribute to Death?	32. If Female: N/A

33 If Transportation Injury, Specify.	34a Date of Injury	34b Time of Injury	34c. Injury at Work?	34d Place of Injury
	34e Describe How Injury Occurred			34f. Location of Injury

PH-1659E RDA 10112

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15373748

I hereby certify the above to be a true and correct representation of the record or document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Tennessee Department of Health. Alteration or erasure voids this certification. Reproduction of this document is prohibited.

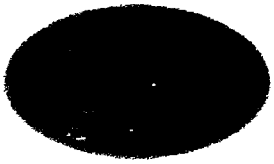
Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977

Edward G Bishop III
State Registrar

Ralph Alvarado, MD, FACP
Commissioner

Date Issued: Sep-06-2023

CERTIFICATION OF VITAL RECORD



S A G FUNERAL HOME

1503 Buchanan Street, Nashville, TN 37208

Phone: 615-242-4496 Fax: 615-242-4495

September 21, 2023

Affidavit

Office of Vital Records:

Re: Terry Jay Norman – DOB March 18, 1954 – DOD August 28, 2023

Certificate of Death:

- (line 20, Box 20c) Informants residential address should be 653 Granwood Blvd instead of 653 Granswood Blvd

The reason for the change: Typo on my part and next of kin requests that the s be removed from the street address.

x Rhonda Ganaway

Rhonda Ganaway, Funeral Director
License #4038

Notary Signature — 9-7-2026 Comm Expires — Notary Seal

DWIGHT PATE
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

NOK Signature — Sept 21, 23 Date