

# PROBATE INTAKE SHEET

## I. GENERAL INFORMATION

<b>Name of the decedent:</b>				
<b>Date of death:</b>		<b>Your relationship to the decedent:</b>		
<b>Residence at the time of death:</b>				
<b>Did the decedent have a Will?</b> (Please circle)			<b>YES</b>	<b>NO</b>
<b>What was the marital status of the decedent?</b>	<b>Married</b>	<b>Single</b>	<b>Divorced</b>	<b>Widowed</b>

☐ **PROVIDE A CERTIFIED COPY OF THE DEATH CERTIFICATE**

☐ **PROVIDE THE ORIGINAL WILL (IF THERE IS ONE)**

☐ Have you seen any other attorneys regarding this matter? \_\_\_\_\_

Who wishes to serve as Personal Representative? \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Relationship to decedent \_\_\_\_\_

Named in Will as Personal Representative? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please give, in the box below, information regarding the person(s) named in the Will as Personal Representative(s) and others with equal right to be Personal Representative, if they have the same degree of relationship to the deceased (e.g. child, sibling, etc.)

Name	Address

## II. INTERESTED PERSONS

**Heirs** (Heirs, spouse, children, and issue of any deceased children. If the decedent was not married or never had any children, then the heirs would be his/her parents, if they are still living. If they are not living, the heirs would be the decedent's brothers and sisters and if any of the decedent's brothers and sisters predeceased decedent, the issue of any deceased brothers and sisters, i.e. the nieces and nephews from that deceased brother or sister.)

Name	Address	Relationship	Birthdate if under 18

**Devisee(s)** Those parties named in the Will who are not heirs e.g. charitable organizations, non-relatives

Name	Address

### III ASSETS (to be probated)

#### Personal Property

Provide date of death copies of accounts or appraisals

Item	Account Number	Value
Stocks		
Bonds		
CDs		
Checking Accounts		
Savings Accounts		
Automobiles		
Household Goods and Furniture		
Investments		
Other asset		
Other asset		
Other asset		

#### REAL ESTATE

Provide copies of deed(s) and tax bill as of date of death

IF you do not have a deed please provide for each property:

Address	Owners	Value

Is there a mortgage, lien or other encumbrance against the property? \_\_\_\_ Yes \_\_\_\_ No

If yes, approximately how much \$\_\_\_\_\_

Will the property(ies) be sold \_\_\_\_ Yes \_\_\_\_ No

Will the property(ies) be distributed to heirs \_\_\_\_ Yes \_\_\_\_ No

If yes, to whom:

Name	Address

#### IV DEBTS

##### Known Creditor(s)

Name	Address	Amount

#### V. TRUSTS

If the decedent had a trust,

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name, address and phone number of the person who is administering it

If there is a trust but nobody is administering it, please provide a copy.

#### V. IF ANY KNOWN PROBLEMS OR DISPUTES, PLEASE PROVIDE DETAILS:

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