



PROBATE INITIAL QUESTIONNAIRE

Part One: Personal Information

Your Full Name: _____ Date of Birth: _____

Cell Phone: _____ Personal Email: _____

Home Address: _____

City, State, Zip: _____

Relationship to Decedent: Spouse Child Heir Devisee Other: _____

Part Two: Information About the Deceased

Decedent Full Name: _____

Date of Birth: _____ Date of Death: _____

Gender: Male Female Social Security Number: _____

Last Address: _____

City, State, Zip: _____

Marital Status: Single Married (at time of death) Married (previously deceased spouse)

If Decedent has a previously deceased spouse:

Spouse Name: _____ Date of Death: _____

Was any probate or administration done at the death of the first spouse? Yes No

If yes, where: _____

Part Three: Will Information

Did Decedent Leave a Will? Yes No Did Decedent Leave a Trust? Yes No

(if there is no Will or Trust, please skip to Part Four)

Do you have the original Will? Yes No Date Will was executed: _____

Are there any amendments to the Will? Yes No If so, do you have the original(s)? Yes No

Who is named as the Personal Representative in the Will: _____

If more than one Personal Representative ("PR") is named, will both individuals serve? Yes No

If a named PR will not serve, please list his or her name: _____

Will the other named PR(s) sign a Renunciation of his or her Right to Serve and Consent for the individual/entity named in Part Five to serve alone? Yes No

Part Four: Bond Information

Is bond waived in the Will? Yes No No Will

If there is not a Will or bond is not waived in the Will, will all of the heirs or devisees waive bond? Yes No

If bond will not be waived, please include the following:

Value of Personal Property: _____

Value of all Real Estate: _____ (if any)

Value of Mortgage on Real Estate: _____ (if any)

Expected Annual Income from Property: _____ (if any)

Part Five: Applicant/Personal Representative Information

(Make additional copies as needed for each PR to be appointed)

Full Name of Personal Representative to be Appointed: _____

Will Sign Documents In: State: _____ County: _____

Male Female

Applicant/PR is a: Non-Licensed Individual Licensed Individual Licensed Entity

If Licensed, License Number: _____

If PR is a non-Licensed Individual, please complete the following:

Relationship to Decedent: Spouse Child Heir Devisee Other: _____

Cell Phone: _____ Personal Email: _____

Home Address: _____

City, State Zip: _____

Home Phone: _____ Work Phone: _____

The following information is required for the Probate Cover Sheet:

Race: _____ Height: _____ Weight: _____

Hair Color: _____ Eye Color: _____

Date of Birth: _____ Social Security Number: _____

Qualification to Serve as PR (pick one only)

Nominated in Will **OR**

Applicant/PR Is Decedent's:

Spouse Child

Sibling Parent

Heir (Decedent's natural heir, but there is no Will/not named in Will)

Devisee (Someone named in the Will to inherit property from Decedent's estate)

Other: _____

PR Status: Will Serve

Will nominate someone else to serve Who: _____

(please complete Part Five for the PR to be nominated)

Part Six: Heirs & Devisees

(Make additional copies as needed)

Name: _____ Male Female
 Charity Entity

Relationship to Decedent: Spouse Child Heir Devisee Other: _____

Legal Status: Adult Minor Trust Entity Date of Birth: _____

Address: _____

City, State, Zip: _____

Named PR in the Will? Yes No

If yes, will this individual sign a Renunciation of Right to Appointment and Consent to the PR named in Part Five to Serve? Yes No

Name: _____ Male Female
 Charity Entity

Relationship to Decedent: Spouse Child Heir Devisee Other: _____

Legal Status: Adult Minor Trust Entity Date of Birth: _____

Address: _____

City, State, Zip: _____

Named PR in the Will? Yes No

If yes, will this individual sign a Renunciation of Right to Appointment and Consent to the PR named in Part Five to Serve? Yes No

Name: _____ Male Female
 Charity Entity

Relationship to Decedent: Spouse Child Heir Devisee Other: _____

Legal Status: Adult Minor Trust Entity Date of Birth: _____

Address: _____

City, State, Zip: _____

Named PR in the Will? Yes No

If yes, will this individual sign a Renunciation of Right to Appointment and Consent to the PR named in Part Five to Serve? Yes No

Name: _____ Male Female
 Charity Entity

Relationship to Decedent: Spouse Child Heir Devisee Other: _____

Legal Status: Adult Minor Trust Entity Date of Birth: _____

Address: _____

City, State, Zip: _____

Named PR in the Will? Yes No

If yes, will this individual sign a Renunciation of Right to Appointment and Consent to the PR named in Part Five to Serve? Yes No

Part Seven: Decedent’s Assets

(Make additional copies as needed)

Please list all assets owned by the Decedent. Please list the type of asset (real estate, bank account, etc.), the location of the asset (property address, bank name, etc.) and the approximate value. Please group individual items together ex. jewelry, household furnishings, etc. instead of listing each item individually. Please also list any income or monies owed to the Decedent.

Type of Asset	Location of Asset	Approx. Value

Part Seven: Decedent's Debts*(Make additional copies as needed)*

Please list any and all debts owed by the Decedent. Please list the type of debt (mortgage, credit card, etc.), the name and address of the debt holder (who is owed the money) and the approximate value of the debt.

Type of Debt	Name of Debt Holder	Address of Debt Holder	Approx. Value

Part Eight: Items We Need

- Will (if any) - ORIGINAL
- Will Amendments (if any) – ORIGINAL
- Trust (if any) - COPY
- Death Certificate – COPY (we may need a certified copy later)
- Deed(s) to Real Estate – COPY

Part Nine: Questions?

Please send your completed questionnaire to:

cherrise@silvermanlawpc.com

Thank you for completing the questionnaire!