

<b>STATE OF MICHIGAN PROBATE COURT COUNTY</b>	<b>PETITION FOR PROBATE AND/OR APPOINTMENT OF PERSONAL REPRESENTATIVE</b> <input type="checkbox"/> TESTATE <input type="checkbox"/> INTESTATE	<b>CASE NO. and JUDGE</b>
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Court address \_\_\_\_\_ Court telephone no. \_\_\_\_\_

In the matter of \_\_\_\_\_  
First, middle, and last name

Petitioner's name, address and telephone no.

Petitioner's attorney, bar no., address, and telephone no.

1. I, \_\_\_\_\_, am interested in the estate and make this petition as  
Name of petitioner  
 \_\_\_\_\_ as defined by MCL 700.1105(c).  
Relationship to decedent, i.e., heir, devisee, child, spouse, creditor, beneficiary, etc.

2. Decedent information: \_\_\_\_\_  
Date of death                      Time (if known)  
Put DOB in Ref. No. row 1 on MC 97.      Put last 4 digits of SSN in Ref. No. row 2 on MC 97.  
Date of birth                      Last four digits of SSN

Domicile (at date of death): \_\_\_\_\_  
City/Township/Village                      County                      State

Estimated value of estate assets: Real estate: \$ \_\_\_\_\_ Personal estate: \$ \_\_\_\_\_

3.  A death certificate has been issued, and a copy accompanies this petition as a separate document.  
 No death certificate is available. Attached is alternative documentation of the decedent's death.
4. As far as I know or could ascertain with reasonable diligence, the names and addresses of the heirs and devisees of the decedent and other interested persons, the relationship to the decedent, and the ages of any who are minors are:  
(Required testimony forms are attached.)

NAME	ADDRESS	RELATIONSHIP (Heir/Devisee)	AGE (if minor)*
	Street address		
	City                      State                      Zip		
	Street address		
	City                      State                      Zip		
	Street address		
	City                      State                      Zip		
	Street address		
	City                      State                      Zip		

\*If person is a minor, provide the date of birth on form MC 97a and put the Ref. No. from that form in the box above with the age.

4. (continued)

Of the interested persons listed above, the following are under legal disability or otherwise represented and presently have or will require representation:

NAME	LEGAL DISABILITY	REPRESENTED BY Name, address, and capacity

5.  a. Venue is proper in this county because the decedent was domiciled in this county on the date of death.  
 b. The decedent was not domiciled in Michigan, but venue is proper in this county because property of the decedent was located in this county at the date of death.

6. An application was previously filed and a personal representative was appointed informally.

7. A personal representative has been previously appointed in \_\_\_\_\_ County, \_\_\_\_\_ State and the appointment has not been terminated. The personal representative's name and address are

\_\_\_\_\_  
 Name Address  
 \_\_\_\_\_  
 City State Zip

8.  a. The decedent's will, dated \_\_\_\_\_, with codicil(s) dated \_\_\_\_\_ is/are offered for probate and is/are  attached to this petition.  already in the court's possession.

b. An authenticated copy of the will and codicil(s), if any, probated in \_\_\_\_\_ County, \_\_\_\_\_ State is/are offered for probate, and documents establishing its probate accompany this petition.

c. Neither the original will nor an authenticated copy of a will probated in another jurisdiction accompanies the petition. The original will is lost, destroyed, or otherwise unavailable, but  a copy of the will is attached.  its contents are described below. (Attach additional sheets as necessary.)

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

9. The decedent's will was  formally  informally probated on \_\_\_\_\_ in \_\_\_\_\_ County.

10. To the best of my knowledge, I believe that the instrument(s) subject to this petition, if any, was/were validly executed and is/are the decedent's last will. After exercising reasonable diligence, I am unaware of an instrument revoking the will or codicil(s).

a. After exercising reasonable diligence, I am unaware of any unrevoked testamentary instrument relating to property located in this state as defined under MCL 700.1301.

b. I am aware of an unrevoked testamentary instrument relating to property located in this state as defined under MCL 700.1301, but the instrument is not being probated because \_\_\_\_\_

\_\_\_\_\_  
 The instrument  is attached to this petition.  is already in the court's possession.

11. I nominate \_\_\_\_\_ as personal representative, who is qualified and has the  
Name  
following priority for appointment: \_\_\_\_\_ .  
His/her address is \_\_\_\_\_  
Address  
\_\_\_\_\_  
City State Zip

12. Other persons have prior or equal right to appointment. They are:  
\_\_\_\_\_  
Name Name  
\_\_\_\_\_  
Name Name

13. The will expressly requests that the personal representative serve with bond.

14.  a. The decedent left a will that directs supervised administration.  
 b. The decedent left a will that directs unsupervised administration, but supervised administration is necessary for the protection of persons interested in the estate because (Complete on line below.)  
 c. The decedent died intestate or left a will that does not direct supervised administration, but supervised administration is necessary because \_\_\_\_\_  
\_\_\_\_\_

15. A special personal representative is necessary because \_\_\_\_\_  
\_\_\_\_\_

**I REQUEST:**

- 16. An order determining heirs and that the decedent died  intestate.  testate and the document(s) stated in item 8 is/are valid and admitted to probate.
- 17. Formal appointment of the nominated personal representative  with  without bond.
- 18. Supervised administration.
- 19. Appointment of a special personal representative pending the appointment of the nominated personal representative.

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Petitioner signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney signature