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|---|---|---------------------------|
| <b>STATE OF MICHIGAN<br/>PROBATE COURT<br/>COUNTY</b> | <b>APPLICATION FOR INFORMAL PROBATE<br/>AND/OR APPOINTMENT OF PERSONAL<br/>REPRESENTATIVE (TESTATE/INTESTATE)</b> | <b>CASE NO. and JUDGE</b> |
|---|---|---------------------------|

**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 application as  
Name of applicant

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.      **XXX-XX-** 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

3.  A death certificate has been issued, and a copy accompanies this application 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 spouse, children, devisees, and heirs 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* | AGE (if minor)** |
|------|--------------------------|---------------|------------------|
|      | Street address           |               |                  |
|      | City      State      Zip |               |                  |
|      | Street address           |               |                  |
|      | City      State      Zip |               |                  |
|      | Street address           |               |                  |
|      | City      State      Zip |               |                  |
|      | Street address           |               |                  |
|      | City      State      Zip |               |                  |

\*Specify spouse, child, devisee, or heir.  
 \*\*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<br>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.  a. The decedent died intestate and 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 (if this statement is true, the probate register must deny this

application according to MCL 700.3311): \_\_\_\_\_  
 The instrument  is attached to this application.  is already in the court's possession.

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

- d. 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 are attached to this application.

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

8. 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

9. I nominate \_\_\_\_\_ as personal representative, who is qualified and has the following priority for appointment: \_\_\_\_\_. His/her address is: \_\_\_\_\_

\_\_\_\_\_  
 City State Zip

10. Other persons have prior or equal right to appointment as personal representative. They are:

\_\_\_\_\_  
 Name Name

\_\_\_\_\_  
 Name Name

Suitable renunciations, nominations, and/or a Notice of Intent to Seek Informal Appointment and proof of its service have been or will be filed.

- 11. The will expressly requests that the personal representative serve with bond.
- 12. A special personal representative is necessary because \_\_\_\_\_  
\_\_\_\_\_

**I REQUEST:**

- 13. Informal probate of the will.
- 14. Informal appointment of the nominated personal representative  with  without bond.
- 15. The appointment of a special personal representative pending the appointment of the nominated personal representative.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

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