

STATE OF MICHIGAN PROBATE COURT COUNTY	ACCEPTANCE OF APPOINTMENT	CASE NO. and JUDGE
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Court address _____ Court telephone no. _____

In the matter of _____
First, middle, and last name

1. I have been appointed _____ of the person/estate.
Type of fiduciary

2. I accept the appointment, submit to personal jurisdiction of the court, and agree to file reports and to perform all required duties.

3. For a period of _____ days from the date of my appointment, I exclude from the scope of my responsibility
not to exceed 91 days

the following real estate or ownership interest in a business entity: _____
Describe real property or business interest

because I reasonably believe the real estate or other property owned by the business entity is or may be contaminated by a hazardous substance, or is or has been used in an activity directly or indirectly involving a hazardous substance that could result in liability to the estate or otherwise impair the value of property held by the estate.

 Date

 Signature

 Attorney name (type or print) Bar no.

 Name (type or print)

 Attorney Address

 Address

 City, state, zip Telephone no.

 City, state, zip Telephone no.

 Put DOB in row 10 on MC 97a.
 Date of birth