Petition for Authority to Act as Personal Representative

		DECEDI	ENT	
	The (Petitioner(s)) (state names, address, ph#) states under oath that:			
(1)	The decedent died on	a resident of	resident ofStreet Address	
			Street Address	
	City	State	Zip Code	
(2)	The decedent had (a / no) will (dated		<u> </u>	
(3)		f another jurisdictio	marry [did / did not enter into a civil union or on recognized as a civil union under Delaware law]	
(4)	Does this will create a TRUST?	☐ YES ☐ NO <u>II</u>	yes, fill out the Trust Inquiry Form	
			yes, fill out the Trust Inquiry Form	
(5)	The qualification to act as Personal Represe	entative is		
(5)	The qualification to act as Personal Represe	entative is		
(5)	The qualification to act as Personal Represe	/we have never been		
(5) ————————————————————————————————————	The qualification to act as Personal Representation I/We declare under penalty of perjury that I/I Initial(s):	/we have never been		
(5) ————————————————————————————————————	The qualification to act as Personal Representation I/We declare under penalty of perjury that I/I Initial(s):	/we have never been	convicted of a felony in this or any other jurisdiction.	
(5) (6) Petitt	The qualification to act as Personal Representation I/We declare under penalty of perjury that I/I Initial(s): ioner/Petitioners Requests the grant of: (checkletters Testamentary	we have never been ck one)	convicted of a felony in this or any other jurisdiction. The second sec	
(5) ————————————————————————————————————	The qualification to act as Personal Representation I/We declare under penalty of perjury that I/I Initial(s): ioner/Petitioners Requests the grant of: (checkletters Testamentary Letters of Administration	we have never been ck one)	convicted of a felony in this or any other jurisdiction. The sof Ancillary Administration with Will Annexed are of a Successor Administrator/rix	
(5) ————————————————————————————————————	The qualification to act as Personal Representation I/We declare under penalty of perjury that Lanitial(s): ioner/Petitioners Requests the grant of: (checkletters Testamentary Letters of Administration Letters of Administration with Will Annexed Letters of Ancillary Administration	ck one) Letter Letter	convicted of a felony in this or any other jurisdiction. The sof Ancillary Administration with Will Annexed are of a Successor Administrator/rix	

IV. The decedent was survived by the following persons: <u>NEXT OF KIN: (Nearest relative of decedent, by Marriage, blood relationship or legal adoption.)</u>

NAME	RELATIONSHIP	COMPLETE ADDRESS
testamentary, or small e understand that a pen	te index (Will search and estate affidavit have been alty may be assessed for	Affidavit search) and have not found that letters of administration, a granted nor is there another file folder for this estate. I further missing any appointment without 24 hours' notice. In addition, I is categorized as a complex case. Initial:
application, being duly swo her, their) knowledge and b	orn according to law say (spelief.	the Petitioner(s) named in the s) that the matters alleged in this petition are true and correct to the best of (his,
Attorney of Record		X
Firm-		X
Address		X
Phone		X
SWORN TO AND SUBS	CRIBED before me, at W	ilmington, Delaware thisday of,
<u> </u>		
FOR REGISTER USE	CONLY	REGISTER OF WILLS

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