## (TYPE OR PRINT IN BLACK INK)

## STATE OF NORTH CAROLINA

In The General Court Of Justice Superior Court Division

File No.

		_ County		Before The Clerk				
IN THE MATTER	OF THE	ESTATE OF:						
ame And Address Of Minor				APPLICATION FOR APPOINTMENT OF  GUARDIAN OF THE ESTATE  GUARDIAN OF THE PERSON				
ocial Security No. (Last Four Digits)	Age	Date Of Birth	☐ GENERAL GUARDIAN FOR A MINOR					
ounty Of Residence Of Minor			Name	G.S. 35A-1221, 35A-1225  Name And Street Address, PO Box, City, State And Zip Of Applicant 2				
lame And Street Address, PO Box, City	, State And Z	ip Of Applicant 1						
		T=	Cour	ty Of Residence Of Applicant 2	Telephone No.			
County Of Residence Of Applicant 1	Telephone No.	Name	e And Address Of Attorney For App	plicant(s)				
pplicant(s)'s Relationship Or Interest In	Proceeding				Telephone No.			
Name Of Mother, And Address I		истоw. ( <i>Ашаст сору</i> (res) от	i dealii ce	rtificate(s) if parent(s) not living Name Of Father, And Address If L	• •			
Date Of Death, If Not Living	Cour	nty Of Estate Administration		Date Of Death, If Not Living	County Of Estate Administration			
3. Other persons known to h	ave an inte	erest in this proceeding a	are:	Name And Address				
Relationship To Minor Or Interes	st In Proceedi	ing	Relationship To Minor Or Interest In Proceeding					
was admitted to probate.	Vill and Te Attach_copy	stament of the minor's p of custody or guardianship	parent(s),	probated will, if available.)	a guardian of the minor was int(s) as guardian(s) for the minor,			
Date Of Order Or Probate  County Of Proceeding  File Or Other Identification No.				Name And Address Of Custodian	Or Guardian, II Any			
5. The reason for seeking a	guardian, a	and information concern	ing the n	eed, type and person(s) to	appoint are:			
			ng any in	come and receivables to wh	hich the minor is entitled, is set forth			
on the reverse side of this			onsihilit	ies Of Guardians In North	n Carolina" or I acknowledge that			

said responsibilities and to manage the guardianship estate in accordance with North Carolina law.

said pamphlet is available online at www.nccourts.org/forms and I further acknowledge that I am required to comply with

PART I. PROPERTY OF MINOR'S ESTATE						PART II. OTHER PROPERTY				
	Description			Estim Valu		Description		on		nated lue
1.	Insurance Proceeds			\$		Right Of Action For Injury, Etc.		ry, Etc.		
2.	2. Injury Settlements					(NOTE: Increase bond before receipt.)			\$	
3.	Cash And Uncashed Checks On Hand					2. Interests In Real Property				
4.	Accounts					Custodial Accounts, Trust Income Or Other				
5. Stocks And Bonds						Resources Available For Support Of Minor, NOT Administered Or Received By Guardian				
6. Farm Products, Livestock And Equipment						(Attach itemized list)				
7.	7. Miscellaneous Personal Property					TOTAL PART II.			\$	
8. I	Estimated A	nnual Income	\$			Custodian, Trustee, Attorney-in-fact, Etc.				
ı	Interest And Dividends,Etc					(Name)	(Name)			
Rental Income						Major medical or similar insurance is in				
Annuity, Pension Or Retirement						effect through: (Name Of Insurer)				
	Benefits, So Disability Or	cial Security, Other								
(	Compensati	on, Insurance				(Policy No.)				
Proceeds, Injury Settlement Or Other Periodic Payments					PART III. LIABILITIES					
						1. Mortgage Loans			\$	
						2. Other Secured Loans Or Obligations				
		Subtota	al Of Line 8	\$		3. Unsecure	3. Unsecured Obligations			
9. (	Other					4. Other				
тот	AL PART	I. (base bond on this a	mount)	\$		TOTAL PART III.			\$	
				V	/ERIFI	CATION				
I, the	e undersigne	ed applicant, have re	ad this Applica	ation and	state th	at its contents a	re true to my o	wn knowledge except t	hose ma	itters
stated on information and belief, which I believe to be true.  Date   Signature Of Applicant 1						Date	Signature Of A	Annlicant 2		
Signature of Applicant 1					Signature of Applicant 2					
SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME					ЕМЕ	SWORN/AFI	FIRMED AND	SUBSCRIBED TO	BEFOF	RE ME
Date Signature Of Person Authorized To Administ					Date Signature Of Person Authorized To Admi					
Title					Title					
Date Commission Expires County Where No					County Where Notarized		Date Commission Expires			
SEAL		SEAL								
Гол	h af tha					SENT TO GUA			nlinant/a	\
		he minor to serve in			on this i	Application and t	consents to the	appointment of the ap	pilcarit(s	) as
Date Signature					Date	Date Signature				
Name Of Applicant 1 (Type Or Print)										
Name C	of Applicant 1 (1	Type Or Print)				Name Of Applicant	2 (Type Or Print)			
Relation	ship To Minor					Relationship To Mir	nor			
Parent Custodian Guardian					Parent Custodian Guardian					
SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME						SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME				
Date Signature Of Person Authorized To Administer Oaths						Date	Signature Of F	Person Authorized To Adminis	ter Oaths	
Title						Title				
riue						i ide				
SEAL Date Com		nmission Expires	County Where No	otarized	County Where Note	arized	Date Commission Expires		SEAL	
JEAL										JEAL

NOTE: A copy of this Application and written notice of the time, date and place set for a hearing, shall be served on any parent, guardian or legal custodian of the minor who is not an applicant and who does not sign the waiver and consent above, and any other person the Clerk may direct, including the minor. Service shall be as provided by Rule 4 of the Rules of Civil Procedure unless the Clerk directs otherwise. G.S. 35A-1222.