

STATE OF MAINE

_____ COUNTY PROBATE COURT

DOCKET NO. _____

Estate of _____
Deceased

Application for Informal Appointment
of Personal Representative

Attorney for Applicant, if any

Name

Address

Telephone No. _____ Zip Code

1. Name of applicant:

2. Address and telephone number of applicant:

3. Legal interest of applicant in estate¹ (e.g., surviving spouse, domestic partner, other heir, etc.):

4. Name and address of personal representative whose appointment is sought (Designate mailing and legal addresses, if they are different.):

5. The person listed in item 4 has the following relationship to decedent:
Check one:
 surviving spouse
 domestic partner
 other heir
 creditor
 state tax assessor.

The following persons have a prior or equal right to appointment Explain.²

6. Full legal name of decedent:

7. Date of decedent's death:

8. Date of decedent's birth:³

9. Domicile of decedent at date of death:

10a. Names and addresses of spouse, registered domestic partner, children and other heirs: ⁴

Name	Address	Date of Birth ⁵ if Under 18	Relationship to decedent:
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10b. Is there a domestic partner (non-registered)? YES ___ NO ___ If yes, give name and address. ⁶

11. Does the probate estate contain real estate in Maine? YES ___ NO ___ . If yes, list each municipality and county in which such real estate is located. NOTE: Do not list jointly held property which passes by survivorship.

12. Was decedent domiciled outside of Maine at date of death? YES ___ NO ___ . If yes, identify here decedent's property which was, at the time of decedent's death, or has since then been located in this county, and state whether probate proceedings have been commenced elsewhere with respect to this estate.

13. Has a personal representative of the decedent been appointed by any court prior to this date whose appointment has not been terminated? YES ___ NO ___ If yes, state that person's name and address.

14. Did decedent die more than three years before the date of this petition? YES ___ NO ___. If yes, state here the circumstances which authorize commencing this proceeding.

15. Has the applicant received a demand for notice or is the applicant aware of any demand for notice of any probate or appointment proceeding concerning the decedent that may have been filed in this state or elsewhere?⁹
YES ___ NO ___ If yes, include name and address of person demanding notice.

16. I request the Court to give notice of this filing to the heirs listed in item 10a and 10b and if the decedent was 55 years of age or older, to the Department of Health and Human Services and to the following other persons:¹⁰

17. Check if desired:

___ Pursuant to Rule 80B(a), I request the register to publish notice to creditors. ¹¹

18. Check one:

___ No bond is required. ¹²

___ A personal representative's bond is required and is attached.

___ An estate tax bond is required and is attached. ¹³

19. Check (a) or (b):

___ (a) I know of an unrevoked testamentary instrument relating to property in this estate, and I have attached a statement setting forth why that instrument is not being probated.¹⁴

___ (b) After exercise of reasonable diligence, I am unaware of any unrevoked testamentary instrument relating to property having a situs in this state. ¹⁵

20. Verification:

Under penalty of perjury, I, the undersigned applicant, state as follows:

(a) All of the foregoing facts and statements are complete and accurate as far as I know or am informed.

(b) I understand that by executing this verification I submit personally to the jurisdiction of this court in any proceeding for relief from fraud relating to this application or for perjury that may be instituted against me.

21. I request the register to make the findings and determinations required by 18-A MRSA § 3-308 and to appoint as personal representative the person listed in item 4.

Dated _____

Applicant or Attorney

Fees due upon filing:

Filing Fee \$ _____

Mailing Notices \$ _____

Notice to Creditors \$ _____

Surcharge \$ _____

Abstracts \$ _____

Other \$ _____

Special Instructions

People with priority for appointment equal to or greater than the person whose appointment is sought may renounce or concur by signing here or by a separate writing or by filing a Renunciation/Nomination form (Probate Court Form DE-407). "I hereby renounce my right to appointment or concur in the appointment sought or both as required by law." See 18-A § 3-203 (c).
MRSA _____

If a person wishes to renounce and simultaneously to nominate a substitute personal representative to take the priority of the renouncing party, the renouncing party may accomplish this by being the applicant on this form or by separate written notice.

¹ All statutory references are to Title 18-A MRSA. See § 1-201 (20).

² See § 3-203. In general, the surviving spouse has first priority; heirs come before creditors. All heirs have equal rights of priority under § 3-203.

See below for special instructions.

³ If exact birthdate is unknown, give age in years of decedent at date of death.

⁴ See § 1-201 (17). Relationship of all heirs to decedent should be stated and explained: *e.g.*, "spouse," or "nephew, son of (name) predeceased brother".

⁵ Age is required by law if person listed is a minor. If person listed is an adult (i.e. has attained 18 years of age) the letter "A" may be inserted in place of the person's age. See § 3-301 (a) (1) (ii).

⁶ See § 1-201 (10-A)

⁷ See § 3-201.

⁸ See § 3-108.

⁹ See § 3-301 (a) (1) (v).

¹⁰ This request, accompanied by proper information and fees, fulfills the moving party's duty to give notice pursuant to §§ 3-306, 3-310. Applicant should list all persons to whom notice must be sent, including persons who have filed a demand for notice pursuant to § 3-204. Include address for any person whose address does not appear elsewhere in this form.

¹¹ If this is not checked, the personal representative must publish his own notice.

¹² See § 3-603.

¹³ See 36 MRSA § 4079

¹⁴ See § 3-301 (a) (4).

¹⁵ See § 1-301.

¹⁶ See §§ 1-310 and 3-301 (b).

I certify that no alteration has been made to the official form as most recently approved and promulgated by the Supreme Judicial Court. I also certify that I have met the standards under M.R.Prob.P. 84(b).

Preparer Signature

Typed or Printed Name of Preparer

MARF