

PROBATE INFORMATION FORM

Court File No.:

COMMONWEALTH OF VIRGINIA

(For appointment of executor, administrator, curator, and/or probate of a will without qualification.)

Circuit Court of

1. Decedent's full name..... ☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Unknown

2. Decedent's Residence address at death (street, city, state)

3. Date of birth Date and place of death

4. Proof of death: ☐ Death certificate ☐ Obituary ☐ Other (specify)5. The decedent died: ☐ with a will ☐ without a will. Date of will (and codicils)6. Requested action: appointment of ☐ administrator ☐ executor ☐ curator ☐ probate of will

7. Name of person making request

8. Mailing address

9. Basis for request: ☐ executor named in will ☐ sole distributee ☐ other distributee ☐ creditor☐ other

10. Name of person seeking appointment

11. Day telephone Night telephone

12. Residence address

13. Mailing address, if different

14. Name of any additional person seeking appointment

15. Day telephone Night telephone

16. Residence address

17. Mailing address, if different

18. Name of assisting attorney, if any Telephone

19. Attorney's mailing address

20. The total value of the decedent's real and personal estate ☐ did ☐ did not exceed \$15,000 on the date of death.

I hereby certify that to the best of my knowledge and belief this is an accurate statement of facts, and I acknowledge a continuing legal duty to report any later discovered errors or inconsistencies to the Clerk of Court.

..... DATE	 PRINTED NAME OF REQUESTING PERSON	 SIGNATURE OF REQUESTING PERSON
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INFORMATION TO BE FURNISHED BY EACH PERSON SEEKING APPOINTMENT21. Are you a person under a disability? ☐ yes ☐ no. (See Instructions for explanation.)22. Have you ever been convicted of a felony? ☐ yes ☐ no.23. Have you ever filed for bankruptcy? ☐ yes ☐ no.24. Are you now, or have you ever been, an attorney at law in Virginia or elsewhere? ☐ yes ☐ no. (If yes, and you do not now possess an active license from the Virginia State Bar, explain the details on a separate sheet of paper.)

I (we) hereby certify that to the best of my (our) knowledge and belief this is an accurate statement of facts, and I (we) acknowledge a continuing duty to report any later discovered errors or inconsistencies to the Clerk of Court.

..... DATE	 PRINTED NAME OF REQUESTING PERSON	 SIGNATURE OF REQUESTING PERSON
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