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| <b>Saginaw Chippewa Indian Tribe<br/>Probate Court<br/>6954 E. Broadway<br/>Mt. Pleasant, MI 48858</b> | <b>PETITION FOR PROBATE AND/OR<br/>APPOINTMENT OF PERSONAL<br/>REPRESENTATIVE</b><br><input type="checkbox"/> <b>Supervised</b> <input type="checkbox"/> <b>Independent</b> | <b>CASE NO.</b> |
|--|---|-----------------|

Estate of \_\_\_\_\_

1. I, \_\_\_\_\_, am interested in the estate and make this petition as  
Name of petitioner  
 \_\_\_\_\_ of the deceased.  
Relationship to decedent, i.e., heir, devisee, child, spouse, creditor, beneficiary, etc.

2. Decedent information: \_\_\_\_\_ m. \_\_\_\_\_  
Date of death                      Time (if known)                      Age                      Social Security Number  
 Domicile (at date of death): \_\_\_\_\_  
City/Township/Village                      County                      State  
 Estimated value of estate assets:    Real estate: \$ \_\_\_\_\_    Personal estate: \$ \_\_\_\_\_

3. So far as I know or could ascertain with reasonable diligence, the names and addresses of the heirs and/or devisees of the decedent, the relationship to the decedent, and the ages of any who are minors are as follows:

| NAME | ADDRESS | RELATIONSHIP<br>(Heir/Devisee) | AGE<br>(if minor) |
|------|---------|--------------------------------|-------------------|
|      |         |                                |                   |
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|      |         |                                |                   |

Of the above interested persons, the following are under legal disability or otherwise represented and presently have or will require representation:

| NAME | LEGAL DISABILITY | REPRESENTED BY<br><small>Name, address, and capacity</small> |
|------|------------------|--|
|      |                  |  |
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4.  A personal representative has been previously appointed in \_\_\_\_\_ County, \_\_\_\_\_ and the appointment has not been terminated. The personal representative's name and address are: State \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_  
City, state, zip \_\_\_\_\_

5.  The decedent's will, dated \_\_\_\_\_, with codicil(s) dated \_\_\_\_\_ is offered for probate and is  attached to this petition.  already in the court's possession.  
 An authenticated copy of the will and codicil(s), if any, probated in \_\_\_\_\_ County, \_\_\_\_\_ is offered for probate, and documents establishing its probate accompany this petition. State \_\_\_\_\_  
 Neither the original will nor an authenticated copy of a will probated in another jurisdiction accompanies the petition. The will is lost, destroyed, or otherwise unavailable, but its contents are: (attach additional sheets as necessary)

6.  The decedent's will was  formally  informally probated on \_\_\_\_\_ in \_\_\_\_\_ County.

7. To the best of my knowledge, I believe that the instrument(s) subject to this petition, if any, was validly executed and is the decedent's last will. After exercising reasonable diligence, I am unaware of an instrument revoking the will or codicil(s).

- a. After exercising reasonable diligence, I am unaware of any unrevoked testamentary instrument relating to property.
- b. I am aware of an unrevoked testamentary instrument relating to property but the instrument is not being probated because:

\_\_\_\_\_ The instrument  is attached to this application.  is already in the court's possession.

8.  I nominate \_\_\_\_\_, as personal representative, who is qualified and has priority  
Name \_\_\_\_\_ as: \_\_\_\_\_ His/her address is: \_\_\_\_\_  
Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

9. Other persons having prior or equal right to appointment are:

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

10.  The will expressly requests the personal representative serve with bond.

11.  a. The decedent left a will that directs supervised administration.

b. The decedent left a will that directs unsupervised administration, but supervised administration is necessary for the protection of persons interested in the estate because: (complete on line below)

c. The decedent left a will that does not direct supervised administration, but supervised administration is necessary because: (complete on line below)

12.  A special personal representative is necessary because \_\_\_\_\_.

**I REQUEST:**

13.  An order determining heirs and that the decedent died  with a valid will.  without a valid will.

14.  Formal appointment of the nominated personal representative  with  without bond.

15.  Supervised administration.

16.  Appointment of a special personal representative pending the appointment of the nominated personal representative.

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Petitioner signature

\_\_\_\_\_  
Attorney name (type or print) Bar no.

\_\_\_\_\_  
Petitioner name (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
City, state, zip Telephone no.

Saginaw Chippewa Indian Tribe  
Probate Court  
6954 E. Broadway  
Mt. Pleasant, MI 48858

PROOF OF SERVICE

CASE NO.

Estate of \_\_\_\_\_

1. Titles of the papers served or mailed: \_\_\_\_\_

2. I served by  ordinary mail  registered mail (copy of return receipt)  certified mail (copy of return receipt) the papers described above on:

| Name | Complete address of service | Date |
|------|-----------------------------|------|
|      |                             |      |
|      |                             |      |
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3. I served by **personal service** the papers described above on:

| Name | Complete address of service | Date and Time |
|------|-----------------------------|---------------|
|      |                             |               |

4. After diligent search and inquiry, I have been unable to find and serve the following interested persons:

\_\_\_\_\_

I have made the following efforts in attempting to serve process: \_\_\_\_\_

I declare under the penalties of perjury that this proof of service has been examined by me and that its contents are true to the best of my information, knowledge and belief.

|                   |       |               |                 |
|-------------------|-------|---------------|-----------------|
| Service fee<br>\$ | Miles | Mileage<br>\$ | Total fee<br>\$ |
|-------------------|-------|---------------|-----------------|

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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Saginaw Chippewa Tribal Court  
Probate Division  
6954 East Broadway  
Mt. Pleasant, MI 48858

WAIVER

FILE NO.

The Estate of \_\_\_\_\_

1. I \_\_\_\_\_ am interested in this matter and make this petition as \_\_\_\_\_  
State interest/relationship

2. **I HEREBY WAIVE ANY INTEREST I HAVE IN THE ABOVE ESTATE AND I REQUEST** that any interest I have in the above estate be hereby given to:  
\_\_\_\_\_

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Petitioner signature

\_\_\_\_\_  
Name (type or print) Bar no.

\_\_\_\_\_  
Petitioner name (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
City, state, zip Telephone no.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
County

My Commission Expires: \_\_\_\_\_

**Waiver**