

6954 East Broadway, Mount Pleasant MI 48858

(989) 775-4800

Estate of \_\_\_\_\_  
First, middle, and last name

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: \_\_\_\_\_ am/pm \_\_\_\_\_  
Date of death Time (if known) Age Social Security Number  
 Domicile (at date of death): \_\_\_\_\_  
City/Township/Village County State

Tribal Member  
Name of Tribe City State/Zip Code  
 Tribal Descendent  
Name of Tribe City State/Zip Code  
 Other American Indian  
Name of Tribe City State/Zip Code

Estate assets within tribal jurisdiction: Real Estate: \$ \_\_\_\_\_ Personal estate: \$ \_\_\_\_\_

Per Cap \$ \_\_\_\_\_

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 (Heir/Devisee)	AGE (if minor)

*(attach additional sheets, if necessary)*

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

NAME	LEGAL DISABILITY	REPRESENTED BY Name, address, and capacity

(Attach additional sheets if necessary)

4.  A personal representative has been previously appointed \_\_\_\_\_, 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, documents establishing its probate accompany this petition. State \_\_\_\_\_

Neither the original will nor does 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.  already in the court's possession.

8.  I \_\_\_\_\_, as a 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 request 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 person interested in the estate because:
- \_\_\_\_\_
- c. The decedent left a will that does not direct supervised administration, but supervised administration is necessary because:
- \_\_\_\_\_
12.  A special personal representative is necessary \_\_\_\_\_.

**I REQUEST:**

13.  An order determining heirs and that the decedent died  with  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)	Petitioner Name (type or print)
Address	Address
City, State, Zip	City, State, Zip
Telephone no.	Telephone no.