

Probate Matter Intake Form

I. CONTACT INFORMATION:

Client's Name: _____ Date: _____

Birth Date: _____

*Social Security Number: _____

****We need this to obtain federal tax ID number for the estate***

Mailing Address: _____

Email Address: _____

Day Phone: _____ Cell: _____

Who will be responsible for legal expenses:

II. YOUR ESTATE MATTER:

Please send a copy of the death certificate as soon as is possible.

Full Name of Decedent, including any known aliases (e.g. a/k/a):

Date of Birth: _____

Date of Death: _____

Social Security Number: _____

County where Decedent died: _____ or resided/owned property: _____

Did Decedent have a Will? _____ If yes, do you have the original? _____

Date of Will: _____ Date(s) of Codicil(s): _____

***If you have the original Will, it will have to be lodged with the Court, so please bring it with you or mail to our offices as soon as is possible.**

Who will be Personal Representative, if different from above (name, address, and phone)?

If Decedent was married at the time of death, please provide full name and address of spouse (if spouse predeceased, please give date of death):

If divorced, name of former spouse and year decree issued: _____

If spouse or any children predeceased Decedent, please give name and date of death:

We must give notice of the probate proceeding to surviving heirs and all beneficiaries in the Will (if applicable).

Please identify and give names, addresses, and relationship to Decedent of all heirs/family living on the date of death (including surviving parents).

If an heir is a minor under 18, please identify age and party responsible for his or her care and receiving notice on his or her behalf. Please also identify any and all beneficiaries named in the Will (if applicable) with names and addresses, including those who are disinherited under the Will.

a) _____

b) _____

c) _____

d)

e)

f)

g)

h)

i)

j)
