State of Minnesota	District Court
County of:	Judicial District:
	Court File Number:
	Case Type: Probate
In Re the Estate of:	
	PETITION FOR FORMAL
,	PROBATE OF WILL AND FOR
Decedent (Deceased person)	FORMAL APPOINTMENT OF
	PERSONAL REPRESENTATIVE
Information about the Petitioner:	
1. My name is	. My legal interest to the
Decedent is: (Check all that apply)	
Decedent is. (Check an that apply)	
☐ Nominated Personal Represen	tative
☐ Spouse	
☐ Child	
☐ Other family member:	
☐ Devisee (beneficiary of the W	ill)
☐ Heir	
☐ Creditor	
Other:	
Information about the Decedent:	
2. Decedent was born on	in the city of,
and state of	
3. Decedent died on in t	he city of, and state
of	
4. At least 120 hours, but not more than 3 y 108) have passed, since Decedent's death	vears (except as allowed by Minn. Stat. § 524.3-h.
5. Domicile (address of legal residence) of	Decedent at the time of death:
Street Address:	

Yes No death? Yes No nowledge, at the time of death ar
death? Yes No
death? Yes No
nowledge, at the time of death ar
nowledge, at the time of death ar
eficiaries tructs etc.)
eficiaries trusts etc.)
inclaires, trusts, etc.)
,
ument can be found) ocated:
Filed with this Application
In possession of the Court
Probated elsewhere*
Filed with this Application In possession of the Court
Probated elsewhere*
Filed with this Application
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Document:	Located:
☐ A separate writing found or attached to	referred to in the Will, but not
*If probated	somewhere else, then I have included an authenticated copy of the Will and statement or order probating the Will with this Application.
9. To the best of my l	knowledge and belief, these documents have been validly executed.
	diligent search, I am unaware of any document revoking the Will, and ast Will of Decedent.
11. The Will nominate	as Personal Representative
$\Box$ The nominated	Personal Representative is willing to serve and is not disqualified.
OR	
☐ The nominated	Personal Representative is unable or has declined to serve.
	has priority to serve as Personal
Representative	
(interest to Dec	eedent) and is willing to serve and is not disqualified.
	al Representative of the Decedent appointed in Minnesota or elsewher t has not been terminated.
13. The Will states:	☐ No Bond ☐ Minimum Bond
	□ \$bond □ Unspecified
14. The Will states:	
	☐ informal/unsupervised administration
	☐ supervised administration
	☐ administration not specified.
15. Check one:	
☐ I have not receiv	red a demand for notice and am not aware of any demand for notice of

any probate or appointment proceeding concerning the Decedent that may have been

OR

filed in Minnesota or elsewhere.

☐ Proper notice I notice.	nas been given to those persons	or entities who have filed a demar	nd for
Information about Dece	edent's family and/or intereste	d persons:	
•		s and examples of who needs to Ill interested persons may delay	
16. Check all that ap	ply:		
☐ Decedent left	no surviving spouse.		
	no surviving issue (generally, cl Instructions or get legal advice)	nildren by blood or adoption; for o	other
☐ All issue of D	ecedent are issue of Decedent's	surviving spouse.	
☐ There are issu	e of Decedent that are not issue	of the surviving spouse.	
☐ There are issu	e of the surviving spouse who a	re not issue of the Decedent.	
	<del>-</del>	children, heirs, devisees, and othe ound with reasonable diligence by	y the
Name and Mailing Address (one name per box)	Familial Relationship	Legal Interest (check all that apply)	Birth Date of Minor / Date of Death of deceased Heir or Devisee
	☐ Spouse ☐ Child (minor or adult) ☐ Other family member: (relation)	☐ Devisee (beneficiary of the Will) ☐ Heir (next of kin who would inherit without a Will) ☐ Nominated Personal Representative ☐ Creditor ☐ Other:	

Name and Mailing Address (one name per box)	Familial Relationship	Legal Interest (check all that apply)	Birth Date of Minor / Date of Death of deceased Heir or Devisee
	☐ Child (minor or adult) ☐ Other family member: (relation)	☐ Devisee (beneficiary of the Will) ☐ Heir (next of kin who would inherit without a Will) ☐ Nominated Personal Representative ☐ Creditor ☐ Other:	
	☐ Child (minor or adult) ☐ Other family member: (relation)	☐ Devisee (beneficiary of the Will) ☐ Heir (next of kin who would inherit without a Will) ☐ Nominated Personal Representative ☐ Creditor ☐ Other:	
	☐ Child (minor or adult) ☐ Other family member: (relation)	☐ Devisee (beneficiary of the Will) ☐ Heir (next of kin who would inherit without a Will) ☐ Nominated Personal Representative ☐ Creditor ☐ Other:	
	ed persons listed as heirs lived lo of death? □ Yes □ No	onger than at least 120 hours after	·
	neir:		
	Edeath:		
	<u> </u>	·	<del></del>

19. Statement specifically eliminating all heirs or devisees other than listed [see Minn. Gen. R. Prac. 408(a)]:
Start at (1) and check all boxes that apply moving down the list. Stop when directed.
The Decedent left:
(1) \( \square\) I have listed all Devisees.
(2) $\square$ If Decedent has a living spouse, I have listed the spouse.
(3)   If Decedent has children, I have listed them all (this includes adopted children but not step-children).
(4) $\Box$ If Decedent has deceased children, I have listed all of the deceased child's children.
<b>STOP:</b> If boxes (2), (3), or (4) are checked you do not have to continue. If not checked, move to box 5. Be sure all names of those included above are listed as interested persons in 17.
(5) $\square$ If Decedent has no descendants, I have listed Decedent's parents.
a. $\square$ If Decedent has no living parents, I have listed all Decedent's siblings.
b.   If Decedent has deceased siblings, I have listed all the deceased siblings' descendants (nieces, nephews, grandnieces, grandnephews, etc.)
<b>STOP:</b> If box 5 is checked you do not have to continue. If not checked, move to box 6. Be sure all names of those included above are listed as interested persons in 17.
(6) ☐ If Decedent's parents have no descendants, I have listed Decedent's grandparents (both maternal and paternal).
<ul> <li>(7) Maternal Grandparents</li> <li>a. ☐ If both of Decedent's maternal grandparents are deceased, I have listed Decedent's mother's siblings (Aunts and Uncles).</li> </ul>
b.   If Decedent's mother has deceased siblings, I have listed all of her deceased sibling's children (1 <sup>st</sup> cousins).
c.   If Decedent has no living maternal cousins, I have listed the surviving children of cousins.
<ul> <li>(8) Paternal Grandparents</li> <li>a. ☐ If both of Decedent's paternal grandparents are deceased, I have listed Decedent's father's siblings (Aunts and Uncles).</li> </ul>

		☐ If Decedent's father has decesibling's children (1st cousins).	eased siblings, I have listed all of his deceased
		☐ If Decedent has no living patchildren of cousins.	ernal cousins, I have listed the surviving
	(9) 🗆 Othe	er.	
	•	es 6-9 are checked, be sure all na in 17. Attach a family tree to this	mes of those included above are listed as Application.
Other	than specific	eally listed above, there are no of	her heirs or devisees.
	d on the ab		nedule a hearing on this Petition and
1.	Finding that	t the Decedent is dead.	
2.	Finding that	at venue is proper.	
3.	Finding that law.	t the proceeding was started with	nin the time limitation required by Minnesota
4.	Determining	g Decedent's domicile at death.	
5.	Determining	g Decedent's heirs.	
6.	Determining	g Decedent's testacy status.	
7.	Determining	g the will is valid and unrevoked	and should be probated.
8.	Determining	g that	is entitled to appointment as Personal
	Representat	tive and should be appointed.	
9.	Appointing		as Personal Representative, with
	bond, in $\square$	an unsupervised administration	☐ a supervised administration.
10.	. Issuing Lett	ters Testamentary upon qualifica	tion and acceptance; and

## 11. Granting such other relief as may be proper.

Dated	Signature of Petitioner
	Name: Address:
County and state where signed	City/State/Zip:
	Telephone: Email:
☐ Attorney for Petitioner:	Eman.
OR	
☐ Self-Represented	
Name:	
Firm:	
Address:	