

State of Minnesota

District Court

County of:

Judicial District:	_____
Court File Number:	_____
Case Type:	Probate

Estate of:

_____,
Decedent (Deceased person)

**APPLICATION FOR
INFORMAL PROBATE OF
WILL AND FOR INFORMAL
APPOINTMENT OF PERSONAL
REPRESENTATIVE**

Information about the Applicant:

1. My name is _____

My legal interest to the Decedent is: (Check all that apply)

- Nominated Personal Representative
- Spouse
- Child
- Other family member: _____
- Devisee (beneficiary of the Will)
- Heir
- Creditor
- Other: _____

Information about the Decedent:

2. Decedent was born on _____ in the city of _____, and state of _____.

3. Decedent died on _____ in the city of _____, and state of _____.

4. At least 120 hours, but not more than 3 years (except as allowed by Minn. Stat. § 524.3-108) have passed, since Decedent's death.

5. Domicile (address of legal residence) of Decedent at the time of death:

Street Address: _____

City, State, and Zip Code: _____

County: _____

6. Did Decedent live in MN at the time of death? Yes No

If No, did Decedent own property in MN at the time of death? Yes No

If Yes, what county? _____

7. Decedent’s assets and indebtedness, to the best of my knowledge, at the time of death are as follows:

Probate Assets

Homestead	\$	_____
Other Real Estate	\$	_____
Cash	\$	_____
Securities	\$	_____
Other	\$	_____

Non-Probate Assets (for example: joint accounts, beneficiaries, trusts, etc.)

Joint Tenancy	\$	_____
Insurance	\$	_____
Other	\$	_____

Approximate Indebtedness (See Instructions)

\$ _____

Information about the Will and Personal Representative:

8. The Decedent left:

(check all that apply; identify where each checked document can be found)

Document:	Located:
<input type="checkbox"/> A Will dated _____	<input type="checkbox"/> Filed with this Application <input type="checkbox"/> In possession of the Court <input type="checkbox"/> Probated elsewhere*
<input type="checkbox"/> Codicil(s) (amendments) dated _____	<input type="checkbox"/> Filed with this Application <input type="checkbox"/> In possession of the Court <input type="checkbox"/> Probated elsewhere*
<input type="checkbox"/> Separate writing(s) gifting personal property under Minn. Stat. § 524.2 -513 dated _____	<input type="checkbox"/> Filed with this Application <input type="checkbox"/> In possession of the Court <input type="checkbox"/> Probated elsewhere*
<input type="checkbox"/> A separate writing referred to in the Will, but not found or attached to the Will	

**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. There is no Personal Representative of the Decedent appointed in Minnesota or elsewhere whose appointment has not been terminated.

10. To the best of my knowledge and belief, these documents have been validly executed.

11. After a reasonable diligent search, I am unaware of any document revoking the Will, and I believe this is the last Will of Decedent.

12. The Will nominates _____ as Personal Representative.

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 because:
_____ (interest to Decedent) and is willing to serve and is not disqualified.

13. The Will states:

No bond Minimum bond \$ _____ bond Unspecified

14. The Will also states:

Informal / unsupervised administration

Supervised administration (if so, STOP; you will need to file for *formal* probate instead)

Administration not specified

15. Check one:

I have not received 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 filed in Minnesota or elsewhere.

OR

Proper notice has been given to those persons or entities who have filed a demand for notice.

Information about Decedent's Family and/or Interested Persons (if any):

Carefully read through the Instructions for definitions and examples of who needs to be included as an interested party below. Not including all interested persons may delay the probate.

16. Check all that apply:

Decedent left no surviving spouse.

- Decedent left no surviving issue (generally, children by blood or adoption; for other examples, see Instructions or get legal advice).
- All issue of Decedent are issue of Decedent's surviving spouse.
- There are issue of Decedent that are not issue of the surviving spouse.
- There are issue of the surviving spouse who are not issue of the Decedent.

17. The names and addresses of Decedent's spouse, children, heirs, devisees, and other persons interested in this proceeding so far as known or found with reasonable diligence by the Applicant are:

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
	<input type="checkbox"/> Spouse <input type="checkbox"/> Child (minor or adult) <input type="checkbox"/> Other family member: (relation)	<input type="checkbox"/> Devisee (beneficiary of the Will) <input type="checkbox"/> Heir (next of kin who would inherit without a Will) <input type="checkbox"/> Nominated Personal Representative <input type="checkbox"/> Creditor <input type="checkbox"/> Other:	
	<input type="checkbox"/> Child (minor or adult) <input type="checkbox"/> Other family member: (relation)	<input type="checkbox"/> Devisee (beneficiary of the Will) <input type="checkbox"/> Heir (next of kin who would inherit without a Will) <input type="checkbox"/> Nominated Personal Representative <input type="checkbox"/> Creditor <input type="checkbox"/> Other:	
	<input type="checkbox"/> Child (minor or adult) <input type="checkbox"/> Other family member: (relation)	<input type="checkbox"/> Devisee (beneficiary of the Will) <input type="checkbox"/> Heir (next of kin who would inherit without a Will) <input type="checkbox"/> Nominated Personal Representative <input type="checkbox"/> Creditor <input type="checkbox"/> 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
	<input type="checkbox"/> Child (minor or adult) <input type="checkbox"/> Other family member: (relation)	<input type="checkbox"/> Devisee (beneficiary of the Will) <input type="checkbox"/> Heir (next of kin who would inherit without a Will) <input type="checkbox"/> Nominated Personal Representative <input type="checkbox"/> Creditor <input type="checkbox"/> Other:	

Use another sheet of paper if you need more space for # 17.

18. Have all interested persons listed as heirs lived longer than at least 120 hours after Decedent's date of death? Yes No

If No, list the name of the heir: _____

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) I have listed all Devisees in # 17.
- (2) If Decedent has a living spouse, I have listed the spouse in # 17.
- (3) If Decedent has children, I have listed them all at # 17 (this includes adopted children but not step-children).
- (4) If Decedent has deceased children, I have listed all of the deceased child's children at # 17.

STOP: If boxes (2), (3), or (4) are checked:

- You do not have to continue, but

- Be sure all names are listed as interested persons in # 17.

If boxes (3) or (4) are not checked, move to box (5).

(5) If Decedent has no descendants, I have listed Decedent's parents.

- If Decedent has no living parents, I have listed all Decedent's siblings.
- If Decedent has deceased siblings, I have listed all the deceased siblings' descendants (nieces, nephews, grandnieces, grandnephews, etc.)

STOP: If box (5) is checked:

- You do not have to continue, but
- Be sure all names are listed as interested persons in # 17.

If box (5) is not checked, move to box (6).

(6) If Decedent's parents have no descendants, I have listed Decedent's grandparents (both maternal and paternal) in # 17.

(7) Maternal Grandparents

- If both of Decedent's maternal grandparents are deceased, I have listed Decedent's mother's siblings (Aunts and Uncles).
- If Decedent's mother has deceased siblings, I have listed all of her deceased sibling's children (1st cousins).
- If Decedent has no living maternal cousins, I have listed the surviving children of cousins.

(8) Paternal Grandparents

- If both of Decedent's paternal grandparents are deceased, I have listed Decedent's father's siblings (Aunts and Uncles).
- If Decedent's father has deceased siblings, I have listed all of his deceased sibling's children (1st cousins).
- If Decedent has no living paternal cousins, I have listed the surviving children of cousins.

STOP: If any box in (6) through (8) are checked, be sure all names are listed as interested persons in # 17. Attach a family tree to this Application.

(9) Other (attach family tree and list names as interested persons in # 17).

Other than specifically listed above, there are no other people who are heirs or devisees.

Based on the above, I ask the Registrar to:

1. Enter a statement for informal probate of the Will;
2. Enter an order appointing _____ as Personal Representative of the Estate, with \$ _____ bond, in an unsupervised administration;
3. Issue Letters Testamentary to _____; and
4. Grant such other relief as may be proper.

I declare under penalty of perjury that everything I have stated in this document is true and correct.
Minn. Stat. § 358.116.

Dated

County and state where signed

Signature of Applicant

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

<input type="checkbox"/> Attorney for Applicant: OR <input type="checkbox"/> Self-Represented: Name: _____ Firm: _____

Address: _____ _____ Attorney License No.: _____ Email: _____ Telephone: _____
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