

STATE OF NORTH CAROLINA

File No. _____

In The General Court Of Justice
Superior Court Division
Before The Clerk

_____ County

IN THE MATTER OF THE ESTATE OF:

Name And Address Of Decedent

Social Security No.

County Of Domicile At Time Of Death

Date Of Death

Date Of Will And Codicil(s) If Any

Place Of Death (If Different From County Of Domicile)

Name And Mailing Address Of Applicant

Name And Mailing Address Of Co-Applicant

Telephone No.

Telephone No.

Legal Residence (County, State)

Legal Residence (County, State)

Name And Mailing Address Of Attorney

Attorney Bar No.

Telephone No.

APPLICATION

FOR PROBATE AND LETTERS

TESTAMENTARY OF ADMINISTRATION CTA

G.S. 28A-6-1; 28A-12-4; 31-16; 105-22

I, the undersigned, applying for probate and for letters in the above estate, being first duly sworn, say that:

1. The decedent was domiciled in this county at the time of the decedent's death, or left property or assets in this county, or was a nonresident motorist who died in North Carolina; no other proceeding for probate or for administration is pending in any jurisdiction.
2. The decedent left the paper-writing(s) purporting to be the decedent's Last Will and Testament and codicil(s), dated as shown above.
3. a. I am an executor, devisee or legatee named in the will, or a next-of-kin or creditor of the decedent.
 b. I am the person entitled to apply for letters or am applying after all persons having prior right to apply have renounced.
 c. I am applying subject to G.S. 28A-6-2(1) and move that all necessary citations be issued.
 d. I am the public administrator appointed by the Court.
4. I am not disqualified pursuant to G.S. 28A-4-2 to administer the estate and have not renounced my right to do so.
5. Following the execution of the will there were no children born to or adopted by the decedent, and the decedent did not thereafter marry or obtain a divorce. (If the facts are otherwise, state them on an attachment.)
6. After diligent inquiry, I have determined that the persons listed below are all the persons entitled to share in the decedent's estate. (If there is a court-appointed guardian for any such person(s), list the guardian's name and address on an attachment.)

NAME	AGE	RELATIONSHIP	MAILING ADDRESS

PRELIMINARY INVENTORY

(Give values as of date of decedent's death. Continue on separate attachment if necessary.)

PART I. PROPERTY OF THE ESTATE

1. Accounts in sole name of decedent <i>(List bank, etc., each account no. and balance.)</i> _____ _____ _____	Est. Market Value \$ _____ _____ _____
2. Joint accounts <u>without</u> right of survivorship <i>(List bank, etc., each account no., balance and joint owners.)</i> _____ % Owned By _____ % Owned By _____ % Owned By _____ % Owned By	
3. Stocks and bonds in sole name of decedent or jointly owned <u>without</u> right of survivorship..... _____ % Owned By	
4. Cash and undeposited checks on hand..... 5. Household furnishings..... 6. Farm products, livestock, equipment and tools..... 7. Vehicles..... 8. Interest in partnership or sole proprietor businesses..... 9. Insurance, Retirement Plan, I.R.A., etc., payable to Estate..... 10. Notes, judgments, and other debts due decedent..... 11. Miscellaneous personal property..... 12. Real estate willed to the Estate..... 13. Estimated annual income of Estate.....	

(Base bond on this amount, if applicable.) **TOTAL PART I.** ▶ \$ _____

PART II. PROPERTY WHICH CAN BE ADDED TO ESTATE IF NEEDED TO PAY CLAIMS

1. Joint accounts with right of survivorship <i>(List bank, etc., each account no., balance & joint owners.)</i> _____ _____ _____	\$ _____ _____ _____
2. Stocks and bonds jointly owned with right of survivorship..... 3. Other personal property recoverable (G.S. 28A-15-10)..... 4. Real estate owned by decedent and not listed elsewhere.....	

TOTAL PART II. ▶ \$ _____

PART III. OTHER PROPERTY

1. Entireties Real Estate owned by decedent and spouse <i>(List 1/2 value)</i> 2. Insurance, Retirement Plan, I.R.A., accounts, etc., payable to named beneficiaries..... 3. There <input type="checkbox"/> is <input type="checkbox"/> is not a potential claim for wrongful death arising under G.S. 28A-18.2..... 4. There <input type="checkbox"/> are <input type="checkbox"/> are not transfers over which decedent retained any interest as described in N.C. Inheritance Tax Laws, G.S. 105-2(3) through 105-2(6)..... 5. There <input type="checkbox"/> were <input type="checkbox"/> were not gifts made 3 years or less before decedent's death.....	\$ _____ _____ _____
---	-------------------------------

TOTAL PART III. ▶ \$ _____

Signature Of Applicant	Signature Of Co-Applicant
SWORN AND SUBSCRIBED TO BEFORE ME	SWORN AND SUBSCRIBED TO BEFORE ME
Date	Date
Signature Of Person Authorized To Administer Oaths	Signature Of Person Authorized To Administer Oaths
Date Commission Expires <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> CSC <input type="checkbox"/> Notary	Date Commission Expires <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> CSC <input type="checkbox"/> Notary

SEAL

SEAL