

STATE OF NORTH CAROLINA

File No.

County

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

NOTE TO APPLICANTS: The decision to apply for summary administration rather than regular administration may have significant legal ramifications. Applicants are advised to seek legal counsel.

IN THE MATTER OF THE ESTATE OF:

APPLICATION FOR PROBATE AND
PETITION FOR
SUMMARY ADMINISTRATION

G.S. 28A-28-1 et. seq.

Form with fields for 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, Date Of Marriage, Place Of Marriage, Name And Mailing Address Of Petitioner, Telephone No., Name And Address Of Executor Or Coexecutor Of Will, Telephone No., Legal Residence, File No., Name And Address Of Attorney, Telephone No.

I, the undersigned, apply for probate of the paper writing(s) purporting to be the decedent's Last Will and Testament and codicil(s), dated as shown above. (NOTE: Check one of the following:)

- checkbox The original will [and codicil(s)] is already on file in the office of the Clerk of Superior Court.
checkbox The original will [and codicil(s)] is attached.
checkbox A certified copy of the will [and codicil(s)] is attached.

Upon admission of the will to probate, and upon the recording of a certified copy of said will in each county in which is located any real estate or portion of real estate wholly or partially owned by the decedent, which recording I do hereby certify, I further petition the Court for an Order Of Summary Administration of the above estate.

In support of this Application and Petition, being first duly sworn, I say that:

- 1. The decedent was domiciled in this county at the time of the decedent's death.
2. I am the surviving spouse of the decedent, and I am the sole devisee and sole heir of the decedent. There is no other devisee or heir under the will.
3. The will does not prohibit summary administration. All property passing under the will, if any, goes directly to me and is not in trust. No application or petition for appointment of a personal representative is pending or has been granted in this State.
4. The decedent [checkbox] did [checkbox] did not own an interest in real estate, wholly or partially, at the time of the decedent's death. A complete legal description, sufficient to specifically identify each tract of such real property is attached.
5. The decedent [checkbox] did [checkbox] did not own an interest in personal property at the time of the decedent death. A complete description of the nature of the decedent's personal property, the location and probable value of said property, to the extent that these facts are known or can with reasonable diligence be ascertained, is on the reverse. (NOTE: See the Instructions for Inventory on side two of AOC-E-201.)
6. To the extent of the property received by me under the will of the decedent, I assume all liabilities of the decedent that were not discharged by reason of death, and I assume liability for all taxes and valid claims against the decedent or the estate, as provided in G.S. 28A-28-6.
checkbox 7. A copy of this Petition has been personally delivered or sent by first class mail by me to the last known address, as listed above, of any executor or coexecutor named by the will, other than me.

NOTE TO CLERK: This Application and Petition requires a three step process. First, the admission of the will to probate; second, the issuance of certified copies of the probated will, which the petitioner must then file in each county in which any portion of the real estate is located; and third, processing the Petition For Summary Administration. For the convenience of the parties, the application and petition are collapsed on to one form.

INVENTORY

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

PART I.

		Market Value
1. Accounts in sole name of decedent <i>(List bank, etc., each account no. and balance.)</i>		\$

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.....		
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.

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"/> 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).....		
4. There <input type="checkbox"/> were <input type="checkbox"/> were not gifts made 3 years or less before decedent's death.....		
TOTAL PART III.		\$

SWORN AND SUBSCRIBED TO BEFORE ME		Date
Date	Signature	Signature Of Applicant
<input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court		Name Of Applicant (Type Or Print)
SEAL <input type="checkbox"/> Notary	Date My Commission Expires	