

PC-1.4

**Petition for Probate of Will
formerly SW-72
R.I.G.L. 33-22-2**



Form PC-9.1, Advertising, should be completed in conjunction with this action unless a Waiver is signed by all heirs at law waiving advertising and hearing.



Form PC-9.2, Attorney of Record, should be completed and filed with the estate records.



Form PC-3.6, Statement of Qualification, must be completed and filed with the estate files.

This form has been photo-reduced to accommodate this Manual's dimensions. This form measures 8-1/2" x 14".



With this form, a qualified party petitions the court to admit to probate the last will and testament of the deceased. Also, the form requests that letters testamentary or letters of administration c.t.a. be issued to the Fiduciary.

The Petitioner presents for filing:

- The Petition, the will and/or codicil, certified copy of the death record, and proper fees.
- The names and post office addresses of guardian(s) for heir(s) at law under the age of 18.
- **If an heir at law is adjudged incompetent**, the name and post office address of the guardian(s) if any, and the name and address of the person or institution having the care or custody of the incompetent.
- **If no heirs are listed**, an affidavit under oath stating what efforts the petitioner has made to locate heirs at law.
- **Form PC-3.5, Appointment of Agent.**
- **Form PC-9.1, Waiver**, if advertising is waived.

The Probate Clerk:

- Gives a receipted bill.
- Assigns an estate number and hearing date.
- Advertises this petition if the petition is not waived by all the heirs.
- If advertising requirement is waived, prepares **Form PC-9.1, Waiver.**

STATE OF RHODE ISLAND
County of _____
Estate of _____

DATE FILED _____
PROBATE COURT OF THE _____ Court Use Only
No. _____
Date _____

PETITION FOR PROBATE OF WILL

Respectfully represents that: Name of Decedent _____

Resided in _____ City/Town of Residence _____ Died Intestate _____ Date of Death _____

Personal Estate estimated at \$ _____

Your Petitioner:
Name _____ Relationship to Deceased _____
No. _____ Street _____
City/Town _____ State _____ ZIP _____

respectfully requests that the accompanying instrument dated _____ Date Will and/or Codicil Was Signed _____ may

be admitted to probate as the last will and testament of the deceased and that:

(Check one:) letters testamentary letters of administration c. t. a.

may be issued to:

Name of Fiduciary _____ Relationship to Deceased _____
No. _____ Street _____
City/Town _____ State _____ ZIP _____

Name of Fiduciary _____ Relationship to Deceased _____
No. _____ Street _____
City/Town _____ State _____ ZIP _____

Deceased left the following spouse and heirs at law who would inherit had deceased died intestate: (Indicate any minors ore incompetents.)

Name	Address	Relationship
		(Spouse)

*Attach Form PC-9.1, Waiver, if applicable.
The undersigned petitioner makes affidavit and says that the above facts are true as to the best of his/her knowledge and belief.*

Signature of Petitioner

Sc. _____
Date _____

Subscribed and sworn to before me as to the truth of all of the above facts by the petitioner.

Notary Public (Please Print) _____
Notary Public Signature

DECREE

Upon hearing it is hereby ordered and decreed:

The instrument herewith presented may be admitted to probate as the last will and testament of _____
Name of Deceased

Upon the filing of a bond in the sum of \$ _____ .

(Check one.) with _____ surety
Type

without surety

(Check one.) letters testamentary

letters of administration c.t.a.

may issue to:

Name of Fiduciary

Name of Fiduciary

No. Street

No. Street

City/Town State ZIP

City/Town State ZIP

Appointed APPRAISER:

Appointed Resident AGENT:

Name

Name

No. Street

No. Street

City/Town State ZIP

City/Town State ZIP

Entered as an order and decree of the court on

Date

Probate Judge