

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, Street Address, City, State, And Zip Code Of Decedent

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, Street Address, PO Box, City, State, And Zip Code Of Applicant

Name, Street Address, PO Box, City, State, And Zip Code Of Co-Applicant

Legal Residence (County, State)

Legal Residence (County, State)

Name, Street Address, PO Box, City, State, And Zip Code Of Attorney

Attorney Bar No.

APPLICATION FOR PROBATE AND LETTERS

TESTAMENTARY OF ADMINISTRATION CTA
 AND ADDENDUM (AOC-E-309)

G.S. 28A-2A-1, -2, -5; 28A-6-1; 28A-12-4

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 notices 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 |
|------|-----|--------------|-----------------|
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Original - File Copy - Applicant
(Preliminary Inventory On Reverse)

PRELIMINARY INVENTORY

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

PART I. PROPERTY OF THE ESTATE

| | Est. Market Value |
|---|--------------------------|
| 1. Accounts solely in the name of decedent <i>(List bank, etc., account type, and balance. Do <u>not</u> list account nos.)</i> | \$ |
| | |
| | |
| 2. Joint accounts without right of survivorship <i>(List bank, etc., account type, balance, and joint owners. Do <u>not</u> list account nos.)</i> | |
| % Owned By Decedent | |
| % Owned By Decedent | |
| % Owned By Decedent | |
| % Owned By Decedent | |
| 3. Stocks/bonds/securities solely in the name of decedent or jointly owned without right of survivorship | % Owned By Decedent |
| 4. Cash and undeposited checks on hand | |
| 5. Household furnishings | |
| 6. Farm products, livestock, equipment, and tools | |
| 7. Vehicles | |
| 8. Interests in partnership or sole proprietor businesses | |
| 9. Insurance, Retirement Plans, IRAs, annuities, 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 | |
| 14. Is there a pending lawsuit that involves the decedent? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| <i>(Base bond on this amount, if applicable.)</i> 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., account type, balance, and joint owners. Do <u>not</u> list account nos.)</i> | \$ |
| | |
| | |
| 2. Stocks/bonds/securities registered in beneficiary form and immediately transferred on death or 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. There <input type="checkbox"/> is <input type="checkbox"/> is not entireties real estate owned by decedent and spouse. | |
| 2. There <input type="checkbox"/> are <input type="checkbox"/> are not Insurance, Retirement Plans, IRAs, annuities, 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. | |

| | |
|------------------------|---------------------------|
| Signature Of Applicant | Signature Of Co-Applicant |
|------------------------|---------------------------|

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

| | | | |
|---|--|---|--|
| Date | Signature Of Person Authorized To Administer Oaths | Date | Signature Of Person Authorized To Administer Oaths |
| <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court | | <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court | |
| <input type="checkbox"/> Notary | Date Commission Expires | Date Commission Expires | <input type="checkbox"/> Notary |
| SEAL | County Where Notarized | County Where Notarized | SEAL |