CLERK OF THE CIRCUIT COURT

PROBATE DIVISION, FLAGLER COUNTY, FLORIDA

IN RE: Estate of Case Number: \_\_\_\_\_\_\_\_\_\_ CP 000 \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Division: 48

LOST WILL SUMMARY ADMINISTRATION - F.S. 735.201; F.S. 733.207 & Rule 5.530, 5.510 & 5.025

**Petitioner’s**

* Name & address
* Name & office address

of attorney

* Sworn & signed by petitioner

**Decedent**

* Name & address
* Date of death
* State & County of domicile
* Last 4 digits of s.s. number

**Atty. Or Pro Se Info**

* Name & address
* Phone number
* FL Bar number
* Signed by attorney

**Beneficiaries/ Heirs at Law**

* Name & address of surviving spouse
* Beneficiaries in Will, Codicil, & Separate Writing
* Beneficiaries/ Heirs relationship to decedent
* Year of birth for minor beneficiary/heir

**Assets**

* Detail approximate value & nature of each asset
* Separately list homestead & exempt assets
* Describe each asset with the name of the person to whom it is to be distributed

**Last Will & Testament: Rule 5.200**

* Identify the Will & Codicils presented for Probate
* State petitioner is unaware of any other Wills or Codicils

**Rules 5.510 & 5.025**

* Adversarial case style on pleadings
* Petition restates the terms of the will or have a copy of the will attached
* Testimony of disinterested witness reduced to writing & filed

**Notice**

* Formal notice is given to each person who would inherit if the will is not established; or
* Consents from all intestate heirs filed
* Proof of service of formal notice filed
* Time allowed via formal notice has run

**Additional Information Required by Rule or Statute**

* Statement about venue
* State whether or not domiciliary proceedings are pending in another state or county
* Provide the name & address of foreign PR when proceedings are pending
* Statement that the decedents will does not direct administration as required by F.S. 733
* Facts that the petitioner is entitled to Summary Administration
* Value is less than $75,000 **or** the decedent has been dead more than 2 years

**Creditors**

* State that all creditor claims are barred; **or** that after diligent search and inquiry for any known reasonably ascertainable creditors has been made and **one of the following:**
* The estate is indebted
* Name & address of each creditor, nature & amount of debt

If full payment of the debt is not listed in the Order of Summary Administration the petition must show:

* The name of who will pay the debt
* Creditors consent to substitution or assumption of the debt
* The terms for payment & limitation of liability on the person paying the debt

**Death Certificate – Rule 5.205(a)(3) Note: The name on the death certificate must match the name provided for the decedent on the documents within the case file.**

* Death Certificate for the decedent is filed
* Decedent’s name on the death certificate does not match the name on the forms for administration. Please refer to notes section on this form.

**Order Admitting Will**

* The date in the Order Admitting Will agrees with the date as it appears in the Last Will & Testament
* The Order Admitting Will has a copy of the Will attached or the Will is restated

**Order of Summary Administration**

* Describe the assets and ***specifically designate*** the person to whom each asset is to be distributed
* When required – make provisions for payment of debts as outlined in Probate Rule 5.530(9)

**See notes below:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that I have personally reviewed the documents filed in this matter and that the foregoing check sheet is accurate.

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Attorney of Record Clerk Staff