

PROBATE INTAKE FORM

Please complete this form with the requested information and bring with you to meet with us. The information provided will be required before filing a petition before the court. If you are unsure of any information requested, please so indicate.

Client Information

Name: _____

Address: _____

Home Phone: _____ Work phone: _____ Cell phone: _____

Birth Date: _____ SS#: _____

Employer: _____ Occupation: _____

Relationship to Decedent: _____

Decedent Information

Name: _____

Residence: _____

Date of Death: _____ Place of Death: _____ Age: _____

Cause of death: _____

Did decedent sign a Will? _____ If yes, please bring original. **DO NOT REMOVE STAPLES!**

Address of Real Property/Properties Owned by Decedent: _____

Financial Accounts Owned by Decedent and Values (List any joint tenants or beneficiaries):

Life insurance policies, values and beneficiaries:

Name of Funeral Home: _____

Funeral Cost: _____ Paid by whom? _____

Decedent Family Information (Name and Address for each. If deceased, list date of death.)

Mother: _____

Father: _____

Spouse: _____

Children (Indicate son/daughter – If a son or daughter is deceased, list his or her children):

Siblings (Indicate brother/sister – If a brother or sister is deceased, list his or her children):

Please check if any of the following apply:

- _____ Decedent owns rental or other income-producing property
- _____ Decedent has known creditors
- _____ Decedent received private care by family or other non-paid worker prior to death
- _____ Decedent has minor or disabled children
- _____ Client believes that controversy may arise among family members or other family has already hired attorney
- _____ Decedent had signed trust of any kind
- _____ Money may have been withdrawn without decedent's consent prior to death
- _____ Client or other person served as agent under power of attorney
- _____ Client or other person served as guardian
- _____ Estate proceedings have been filed in another state or county