

# Register of Wills of Bucks County, Pennsylvania

## Petition for Probate and Grant of Letters

Estate of \_\_\_\_\_ No. 09-\_\_\_\_\_

also known as \_\_\_\_\_  
 Social Security No. \_\_\_\_\_

Petitioner(s) who is/are 18 years or older, apply(ies) for: (complete "A" or "B" below)

**A. Probate and Grant of Letters Testamentary** and aver that the Petitioner(s) is/are the execut \_\_\_\_\_  
 named in the last original Will ( Self-proven) of the Decedent, dated \_\_\_\_\_ and codicil(s) dated \_\_\_\_\_

(State relevant circumstances, e.g., renunciation, death of executor, etc.)

Except as follows, Decedent did not marry, was not divorced, and did not have a child born or adopted after execution of the instrument(s) offered for probate, was not the victim of a killing and was never adjudicated an incapacitated person:

**B. Grant of Letters of Administration** \_\_\_\_\_  
 (If applicable, enter: c.t.a.; d.b.n.c.t.a.; pendente lite; durante absentia; durante minoritate)

Petitioner(s) after a proper search has/have ascertained that Decedent left no Will and was survived by the following spouse (if any) and heirs: (If Administration, c.t.a. or d.b.n.c.t.a., enter date of Will on Section A above and complete list of heirs.)

Name	Relationship	Residence
<i>(COMPLETE IN ALL CASES: Attach additional sheets, if necessary)</i>		

Decedent was domiciled at death in \_\_\_\_\_ (twp/boro) Bucks County, Pennsylvania, with (his/her) last principal residence at \_\_\_\_\_  
 Decedent, then \_\_\_\_\_ years of age, died on \_\_\_\_\_ at \_\_\_\_\_

Decedent at death owned property with estimated values as follows:

(If domiciled in PA)	All personal property	\$ _____
(If not domiciled in PA)	Personal property in Pennsylvania	\$ _____
(If not domiciled in PA)	Personal property in County of Bucks	\$ _____
Value of real estate in Pennsylvania		\$ _____

situated as follows: \_\_\_\_\_

Wherefore Petitioner(s) respectfully request(s) the probate of the last Will and Codicil(s) presented with this Petition and the grant of letters in the appropriate form to the undersigned.

Signature	Typed or Printed Name, Residence and Telephone Number

# Oath of Personal Representative(s)

Commonwealth of Pennsylvania }  
 County of Bucks } ss

The Petitioner(s) above-named swear(s) or affirm(s) that the statements in the foregoing Petition are true and correct to the best of the knowledge and belief of Petitioner(s) and that, as personal representative(s) of the Decedent, Petitioner(s) will well and truly administer the estate according to the law and have provided proper identification.

Sworn to or affirmed and subscribed  
 before me this \_\_\_\_\_ day of

\_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_ for the Register of Wills

✓  
 Identification: \_\_\_\_\_  
 ✓  
 Identification: \_\_\_\_\_  
 ✓  
 Identification: \_\_\_\_\_

File No. 9- \_\_\_\_\_

Estate of: \_\_\_\_\_, Deceased

## Decree and Grant of Letters

AND NOW \_\_\_\_\_, \_\_\_\_\_ in consideration of the foregoing petition on the reverse side thereof, satisfactory proof having been presented before me, IT IS DECREED that Letters \_\_\_\_\_ are hereby granted to \_\_\_\_\_

in the above estate and that the instrument(s) dated \_\_\_\_\_ described in the Petition be admitted to probate and filed of record as the Last Will [and Codicil(s)] of Decedent.

### FEES

Letters .....	\$ _____
Pages on Will ( ) .....	\$ _____
Codicils ( ) .....	\$ _____
Short Certificates ( ) .....	\$ _____
Renunciations ( ) .....	\$ _____
Witness Affidavits ( ) .....	\$ _____
Filing Inventory .....	\$ _____
Filing Inheritance Tax Returns .....	\$ _____
Processing Fee .....	\$ _____
Pleadings & Papers .....	\$ _____
State Surcharge .....	\$ _____
Bucks County ACP .....	\$ _____
Traveling Register .....	\$ _____
Mileage .....	\$ _____
Other .....	\$ _____
.....	\$ _____
.....	\$ _____
<b>TOTAL</b> .....	<b>\$ _____</b>

\_\_\_\_\_  
*Register of Wills*

\_\_\_\_\_  
 ATTORNEY

\_\_\_\_\_  
 (Supreme Ct. I.D. No.)

\_\_\_\_\_  
 ADDRESS

\_\_\_\_\_  
 TELEPHONE