Sta	ate of Minnesota	ı	District Court					
Co	County		Judicial District: FOURTH					
			Court File Number: 27-P					
			Case Type: PROBATE N	MENTAL HEALTH				
In l	Re: Estate of							
			APPLICATION FOR INFORMAL					
			APPOINTMENT OF PERSONAL REPRESENTATIVE (No Will)					
			KLI KLSLIVIA	TIVE (NO WIII)				
, Deceased								
 I,			otata:					
	Mar addus as the		, state:					
1.	My address is:							
2.	2. I am an interested person as defined by Minnesota law because I am:							
3.	Decedent was born	n on	, at (city, state)					
4.	4. Decedent died on		, at (city, state)					
5.	5. Decedent at the time of death lived at: (street address)							
	County of .							
6.	6. Decedent's spouse, children, heirs, devisees, demandants and other persons interested in this proceeding							
	so far as known or ascertainable with reasonable diligence by the Applicant : (can use separate sheet of							
	paper if needed)							
	7							
Name	2	Mailing Address	Relationship and Legal Interest	Adult or Minor				
			(list all)	(Minor date of birth)				

- 7. Negative Allegation Statement (see Guide for sample language):
- 8. All persons identified as heirs have survived the Decedent by at least 120 hours.
- 9. Did decedent leave a surviving spouse?
- 10. Did decedent leave any surviving children?
- 11. Are the children of the decedent also children of the surviving spouse?
- 12. Does the decedent have any surviving children not children of the surviving spouse? What is/are their name(s)?

)

- 13. Does the surviving spouse have any children not children of the decedent?
- 14. Venue for this estate is in Hennepin County, State of Minnesota because:

Decedent lived in Hennepin County at the time of death and owned either personal or real property in the State of Minnesota. OR

Decedent did not live in the State of Minnesota but owned real or personal property located in Hennepin County at the time of death.

15. Assets and Indebtedness:

**Probate Assets** (those in the decedent's name alone)

Homestead \$

Other Real Estate \$

(Name of county

Cash/Bank Accounts \$

Stocks/Bonds \$

Diocks/ Donas q

Automobile \$

Other \$

**Non-Probate Assets** (named beneficiary)

Joint tenancy property \$

Insurance \$

Other \$

**Approximate Amount of Debts (unsecured debt only) \$** 

- 16. There is no personal representative of the Decedent appointed in Minnesota or elsewhere whose appointment has not been terminated. 17. Have you received a demand for notice? If yes, has proper notice been given to those persons who filed the demand(s)? (See the website for information on how to handle notice to a demandant.) Does Hennepin County Human Services have a claim against the estate? • If yes, will they require the personal representative to be bonded? • If yes, how much will the bond be? • Is the personal representative pre-approved for the bond? 18. The time limit for informal appointment proceeding as provided by Minnesota law has not expired because it has been 3 years or less since decedent's death. 19. Having conducted a reasonably diligent search, I am unaware of any testamentary instrument under Minnesota law and believe that the Decedent died leaving no will. 20. Priority for Appointment as Personal Representative. is entitled to priority and appointment as personal representative because: and is willing to serve and is not disqualified. 21. There are no persons having a prior or equal right to the appointment who have not renounced their right to appointment or joined in nominating 22. Have 5 days (120 hours), but not more than 3 years have passed since decedent's death? **WHEREFORE,** I request the Registrar informally: 1. Enter an order appointing as the personal representative of the Estate, with no bond, in an unsupervised administration; 2. Issue Letters of General Administration to (name of personal representative); and 3. Grant such other relief as may be proper.

Under penalties for perjury, I declare or affirm that I have read this document and I know or believe its representations are true and complete.

	Signature of Applicant	Date
ahar:		

Daytime phone number:

E-mail address: