

State of Minnesota

District Court
Probate Division

County of _____

Judicial District: _____

Court File No. _____

Case Type: Guardianship/Conservatorship

In Re: Conservatorship of
_____,

**AFFIDAVIT IN SUPPORT OF
PETITION TO SELL REAL
PROPERTY**

My name is _____. My statement of facts:

1. I am the court-appointed conservator of the estate of the person subject to conservatorship referenced above. I was appointed on _____.
2. I have been and will be responsible for the administration of the conservatorship.
3. I have had an opportunity to review the assets and unpaid bills.
4. I have visited the person subject to conservatorship.
5. I have secured and protected the house located at _____.
6. The person subject to conservatorship currently lives at _____.
7. The income of the conservatorship is made up of:
 - _____ in the amount of \$_____ per month;
 - _____ in the amount of \$_____ per month; and
 - _____ in the amount of \$_____ per month.

If you need more room, add more paper.

8. The assets of the conservatorship are made up of an interest in the _____ County real estate with an assessed market value of \$_____, and the personal property as listed in the inventory of the conservator in the amount of \$_____.

9. That the real estate taxes, utilities, and insurance expenses in connection with the properties are more than \$_____ per year.

10. That the homestead should be sold for the following reasons:

- a. The property is not earning income;
- b. The person subject to conservatorship does not need the house as their residence;
- c. The person subject to conservatorship is not able to return to independent living;
- d. The income of the conservatorship would be increased by selling the property;
- e. The Department of Economic Assistance requires that the property be sold in order for the person subject to conservatorship to be eligible for Medical Assistance benefits; and
- f. It is in the best interest of the person subject to conservatorship.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

Petitioner

County and state where signed:

Name of Petitioner's Attorney:

Name: _____

License No. _____

Address: _____

City/State/Zip: _____

E-mail address _____