STATE OF SOUTH CAROLINA)) IN THE PROBATE COURT	
COUNTY OF:)		
IN THE MATTER OF:)) CASE N)) CASE NUMBER:	
(Decedent)			
*COMPLETE THE SECTION ON VIE EI INC	PETITION		
*COMPLETE THIS SECTION ONLY IF FILING FOR FORMAL TESTACY AND/OR FORMAL			
*Petitioner(s)	,		
VS.			
*Respondent(s)	,		
Respondent(s)			
APPLICATION FOR INFORMAL PROBATE OF WILL	(check any that apply)	*PETITION FOR FORMAL TESTACY	
☐ APPOINTMENT		☐ APPOINTMENT	
If this is a formal filing, please explain o	on page 4 or attach pleadings purs	uant to SC Rules of Civil Procedure.	
A SUMMONS (FORM SCCA 401PC), A	AND PAY THE STATUTORY FILI	FORM PETITION, YOU MUST ALSO FILE NG FEE OF \$150.00. A HEARING IN THE	
PROBATE COURT ON THE PETITION	NMAY BE REQUIRED.		
I. ALL APPLICANTS/PETITIONERS MUST C	COMPLETE THIS SECTION.		
1 Applicant/Potitionar/s):			
Applicant/Petitioner(s): Address:			
Telephone (Work):			
(nome).			
(Cell):			
Email:			
Relationship to Decedent:			
2. Decedent Information:			
Full Legal Name			
(including all known names):			
Date of Birth:			
Date of Death.			
Age at Date of Death:			
3. Venue for this proceeding is proper in the	his County because:		
☐ Decedent was domiciled in this County			
	South Carolina.	town book the the Occuptor	
Decedent was not domiciled in South of death at:	Carolina, but property of Deceden	it was located in this County	
	South Carolina		
Decedent has a right to take legal actio			
If the above address is the address of a of the Decedent prior to entering a facil		sidential facility, please give the last address	

FORM #300ES (09/2020) Page 1 of 6

/.	Full Legal Name	Year of Birth	Full Address	Email Address	Relationship
(Inc	cluding all known names)				to Decedent
				_	
{	See attached for additional	devisees (check if	applicable).	_	
4(k	o). Names and addresse	es of intestate heirs	who are not devisees (perso	ons who inherit if Decedent	left no Will).
(inc	Full Legal Name cluding all known names)	Year of Birth	Full Address	Email Address	Relationship to Decedent
				_	
				_	
	See attached for additional	intestate heirs (che	ck if applicable).		
4(0	c). Did all of the above p	persons survive one	hundred and twenty (120) h	ours since the death of De	cedent?
	☐ YES ☐ NO If no, ple	ase explain on page	e 4.		
5.		d of the Decedent b	us or the birth or adoption o een born since his/her death en.)		
	☐ NO ☐ YES If yes, p	lease explain, on pa	ge 4.		
	To the best of your knowled facility during his/her lifeting		dent a patient in a non-privat	te State of South Carolina r	mental health
	☐ NO ☐ YES If yes, p	lease explain, on pa	ge 4.		
7 .	Has a Guardian or Conse	rvator ever been app	pointed by a Court for this pe	erson?	
	☐ NO ☐ YES If yes, p	lease explain on paç	ge 4.		
	Has a Personal Represen elsewhere?	tative of the Decede	ent been appointed prior to the	nis date by a Court in this s	tate or
	☐ NO ☐ YES If yes, p page 4.	lease state details, i	ncluding name and address	of such Personal Represe	ntative on
			emands for Notice (FORM # y have been filed in this state		appointment
	☐ NO ☐ YES If yes, p	lease state details, i	ncluding names and addres	ses on page 4.	

FORM #300ES (09/2020) Page 2 of 6

10.	nave more man ten	r (10) years passed since the Decedent's death?
	□ NO □ YES If	yes, please state circumstances authorizing tardy probate on page 4.
11(a).	Did the Decedent of	wn probate real estate?
		If yes, an approximate value of \$ (Note: A complete inventory of probate assets with fair market values is to be filed after Personal Representative is appointed.)
11(b).	Did the Decedent of	wn probate personal property?
	□ NO □ YES	If yes, an approximate value of \$ (Note: A complete inventory of probate assets with fair market values is to be filed after Personal Representative is appointed.)
11(c).		ppointment as Personal Representative in order to pursue civil litigation on behalf of the Decedent's civil litigation attorney?
	☐ NO ☐ YES	If yes, please provide the name of the civil litigation attorney:
11(d).	At the time of Dece attorney?	edent's death, was he or she involved in any pending civil litigation? Is there a civil litigation
	☐ NO ☐ YES	If yes, please state the circumstances and name of attorney on page 4.
11(e).	•	O to questions 11(a) - 11(d) above, but are seeking the appointment of a Personal Representative, y the appointment is requested on page 4.
12.	Have you made a d	iligent search for a Will of the Decedent?
	☐ YES ☐ NO If	no, please explain on page 4.
II. IF	F A WILL EXISTS, P	LEASE COMPLETE THIS SECTION.
1. F	Regarding the Deced	lent's Will:
	☐ An exemplified ☐ An exemplified ☐ The original of t	attached. In the Court's possession. (authenticated) copy of a Will probated in another jurisdiction is attached. (authenticated) copy of a Will not probated in another jurisdiction is attached. (the Will is lost, destroyed, or otherwise unavailable, however, a copy or a description of its contents of formal proceeding, explain below or attach supplemental pleadings)
2.	The execution date	of the Will was: Codicil(s):
3.	Is there a memoran	dum that disposes of tangible personal property pursuant to 62-2-512?
	□ NO □ YES	If yes, attach hereto.
4.	To the best of your	knowledge, do you believe the Will listed above is the Decedent's validly executed last Will?
	☐ YES ☐ NO	If no, please explain on page 4.
5.		knowledge, is any witness to the will an "interested witness" (i.e., does the will make any devise to a spouse, or a witness's issue)?
	□ NO □ YES	If yes, please explain on page 4.

FORM #300ES (09/2020) Page 3 of 6

	ATION(S) FOR QUESTIONS IN SECTIONS I and II HERE.
(If more space is requir	ired, use additional sheets.)
IF APPLYING FOR INFORMAL OR FORM	MAL APPOINTMENT, PLEASE COMPLETE THE FOLLOWING.
If the Applicant/Petitioner is not the proyou are proposing be appointed as the	pposed Personal Representative(s), list name and address of the person fiduciary:
2. Priority for appointment of the proposed	ed Personal Representative (whether applicant or nominee) is:
 other devisee of Decedent (describe) surviving spouse of Decedent or not other heir of Decedent (describe) creditor (forty-five (45) days after declaim, FORM 371ES, is attached other (describe) 	resentative in Will resentative in Will presentative in Will presentative in Will presentative of Decedent or nominee of said spouse pe):or nominee of said devisee pominee of said spouse
ALL APPLICANTS/PETITIONERS MUS	IST COMPLETE VERIFICATION.
ALL APPLICANTS/PETITIONERS MUS	IST COMPLETE VERIFICATION. VERIFICATION
e undersigned, being sworn, states that the f	
e undersigned, being sworn, states that the f	VERIFICATION facts set forth in the foregoing statement are true to the best of the ef, and hereby submits to the Court's jurisdiction in this matter. Signature of
e undersigned, being sworn, states that the f dersigned's knowledge, information and belie /ORN to before me this day , 20	VERIFICATION facts set forth in the foregoing statement are true to the best of the ef, and hereby submits to the Court's jurisdiction in this matter. Signature of
e undersigned, being sworn, states that the f dersigned's knowledge, information and belie ORN to before me this day	VERIFICATION facts set forth in the foregoing statement are true to the best of the ef, and hereby submits to the Court's jurisdiction in this matter. Signature of Applicant/Petitioner: Signature of Co-

FORM #300ES (09/2020) Page 4 of 6

ORDE	ER OF INFOR	MAL PROBAT	E
IT IS HEREBY ORDERED that the above application of the control of	on for probate	e of a Will execu	itedand
be informally GRANTED DENIED.			
Executed this	day of	, 2 .	
			, Probate Court Judge
☐ For formal probate of Will, see separate order e	executed		
ORDER	OF INFORM	AL APPOINTM	ENT
IT IS HEREBY ORDERED that the above Application applicable, and upon the signing of the Qualification			
Bond Fiduciary Bond in the amount of \$ Bond not required for Personal Representat Bond not required as Personal Representat Bond not required as Personal Representat Bond waivers filed See order dated Other:	tive is sole hei	r or sole devise	
Executed this	day of	, 2 .	
			, Probate Court Judge
☐ For formal appointment of Personal Representa	ative, see sepa	arate order exec	cuted

FORM #300ES (09/2020) Page 5 of 6

QUALIFICATION AND STATEMENT OF ACCEPTANCE

I accept this appointment and agree to perform the duties and discharge the trust of the office of Personal Representative of this estate. I further submit personally to the jurisdiction of the Court in any proceeding relating to the Estate.

Signature:	
Print Name:	
Address:	
Telephone (Work):	
(Home):	
` (Cell):	
Email:	
0: (
Signature:	
Print Name:	
Address:	
Telephone (Work):	
(Cell):	
Èmail:	
*Attorney:	
Address:	
Telephone:	
Email:	

FORM #300ES (09/2020) Page 6 of 6

^{*}By completing this information, attorney is designated as attorney of record for assisting Personal Representative until proper withdrawal.