

# Petition for Summary Administration

IN THE CIRCUIT COURT FOR \_\_\_\_\_, FLORIDA

IN RE: ESTATE OF

PROBATE DIVISION

\_\_\_\_\_

File No. \_\_\_\_\_

## PETITION FOR SUMMARY ADMINISTRATION

Petitioner, \_\_\_\_\_, respectively request the entry of an order of summary administration and in support thereof alleges.

- 1) Petitioner has an interest in this estate as \_\_\_\_\_.
- 2) Decedent's last known address was \_\_\_\_\_.  
His/Her social Security number is \_\_\_\_\_.
- 3) Decedent died on \_\_\_\_\_, at the age of \_\_\_\_\_. At the time of his/her death, Decedent was domiciled in County of \_\_\_\_\_, Florida.
- 4) Petitioner is entitled to Summary Administration because:
  - a. The Decedent's will does not direct administration as required by Chapter 733, Florida Statutes.
  - b. The value of the entire estate subject to administration in this state, less the value of property exempt from the claims of creditor, does not exceed \$75,000.00.
  - c. The Decedent has been dead for more than two years.
- 5) The assets of this estate and the estimated value of each, as well as the separately designated exempt assets of this estate are as follows:

ASSETS	ESTIMATED VALUE
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

- 6) Petitioner has made a diligent search and reasonable inquiry for any known or reasonably ascertainable creditors.
- 7) As to claims of creditors:
  - a. All claims of creditors are barred.
  - b. The estate is indebted and provision for payment of debts has been arranged as follows:  
\_\_\_\_\_.
- 8) The names of the beneficiaries of this estate and of the Decedent's spouse, if any, their addresses and their relationships to the Decedent and the dates of birth of any such beneficiaries who are minors, are:

NAME	ADDRESS	RELATIONSHIP	DATE OF BIRTH (IF MINOR)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9) A schedule of proposed distribution of assets in this estate, including separately designated exempt property, and the person to whom each asset is to be distributed follows:

NAME	ASSET/SHARE AMOUNT
_____	\$ _____
_____	\$ _____
_____	\$ _____

10) Venue is proper in this county because \_\_\_\_\_.

*[EITHER:]*

11) The original of Decedent's will dated *[date of will]*, is in the possession of the court or accompanies this petition. Petitioner is not aware of any unrevoked will or codicil of Decedent.

*[OR:]*

11) After the exercise of reasonable diligence, Petitioner is not aware of any unrevoked wills or codicils of Decedent.

*[END OF CHOICES]*

Petitioner acknowledges that any known or reasonable ascertainable creditor who did not receive notice of this petition and for whom provision of or payment has not been made may enforce the claim and, if the creditor prevails, creditor shall be awarded reasonable attorney's fees as costs against Petitioner.

Petitioner waives notice of hearing on this petition and requests the entry of an order of Summary Administration directing distribution as proposed in paragraph 8, above.

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true to the best of my knowledge and belief.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Petitioner's Name

\_\_\_\_\_  
Petitioner's Address

\_\_\_\_\_  
Petitioner's Telephone Number