Reset Form

PROBATE COURT OF SUMMIT COUNTY, OHIO
ELINORE MARSH STORMER, JUDGE

ESTATE OF _____, DECEASED

CASE NO. _____

APPLICATION FOR AUTHORITY TO ADMINISTER ESTATE
[R.C. 2109.02 and 2109.07]

[For Executors and all Administrators; attach supplemental application for ancillary administration, if applicable]

Applicant says that decedent died on _____

Decedent's domicile was _____
Street Address

_____
City, or Village, or Township (if unincorporated area) County

_____
Post Office State Zip Code

Applicant asks to be appointed _____ of decedent's estate.

[Check whichever of the following is applicable]

- ☐ To applicant's knowledge, decedent did not leave a Will.
- ☐ Decedent's Will has been admitted to probate in this Court.
- ☐ A supplemental application for ancillary administration is attached.

Attached is a list of the surviving spouse, children, next of kin, and legatees and devisees known to applicant, which list includes those persons entitled to administer the estate.

The estimate value of the estate is:

Personal Property	$_____
Annual real property rentals	$_____
Subtotal, personal and rentals	$_____
Real Property	$_____
Total estimated estate	$_____
Applicant owes the estate	$_____
The estate owes applicant	$_____

[Check whichever of the following is applicable]

- ☐ Applicant says that decedent's Will requests that no bond be required, and therefore asks the Court to dispense with bond.
- ☐ Applicant is a trust company duly qualified in Ohio, and bond is dispensed with by law.
- ☐ Applicant is decedent's surviving spouse, and is entitled to the entire net proceeds of the estate, or is the next of kin entitled to the entire net proceeds of the estate and there is no will, therefore bond is dispensed with by law.
- ☐ Applicant offers the attached bond in the amount of $_____.
- ☐ Decedent was fifty-five (55) years of age or older at the time of death and was a recipient of medical assistance under Chapter 5111 of the Revised Code. Form 7.0 - Notice of Administrator of Estate Recovery Program has been or will be filed.

CASE NO. _____

Applicant accepts the duties of the fiduciary in the estate, imposed by law, and such additional duties as may be required by the Court. Applicant acknowledges being subject to removal as fiduciary for failure to perform such duties as required, and also acknowledges being subject to criminal penalties for improper conversion of any property held as fiduciary.

Attorney for Applicant's Signature	Applicant's Signature
Attorney for Applicant's Typed or Printed Name	Applicant's Typed or Printed Name
Address	Address
City State Zip	City State Zip
Telephone Number (include area code)	Telephone Number (include area code)
Attorney Email Address	Applicant's Email Address

Attorney Registration No. _____

WAIVER OF RIGHT TO ADMINISTER

[R.C. 2113.06]

The undersigned, being persons entitled to administer decedent's estate, and whose priority of right to do so is equal or superior to that of applicant, hereby waive appointment to administer the estate.

_____	_____
_____	_____
_____	_____

ENTRY SETTING HEARING AND ORDERING NOTICE

The Court sets _____ at _____ o'clock .M. as the date and time for hearing the application for authority to administer decedent's estate. The Court orders notice to take or renounce administration to be given those persons entitled to administer decedent's estate, whose priority of right to do so is equal or superior to that of applicant, and who have not waived appointment to administer the estate.

IT IS SO ORDERED.

_____ JUDGE ELINORE MARSH STORMER

Date