

**IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT IN AND FOR
SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION**

IN RE: ESTATE OF

Case No. _____

Deceased

**PETITION FOR ADMINISTRATION
Testate (With Will)**

Petitioner(s), _____ alleges:

1. Petitioner(s) has/have an interest in the above Estate as the _____ of the decedent.

PETITIONER(S) NAME(S)	ADDRESS(ES)

.

2. Decedent, _____, whose last known address was _____, and the last four digits of whose social security number are _____, died on _____, at _____, in _____(city) , Florida. On the date of death, decedent was domiciled in Seminole County, Florida.
3. So far as is known, the names of the beneficiaries of this estate and of the decedent's surviving spouse, if any, their addresses and relationships to decedent, and the years of birth of any who are minors, are:

NAME	ADDRESS	RELATIONSHIP TO DECEDENT	YEAR OF BIRTH [if minor]

4. The venue of this proceeding is in this county because this is the county where the decedent was domiciled at the time of his/her death.
5. Petitioner(s) _____, whose address is _____, is qualified to serve as Personal Representative because he/she has not been convicted of a felony, are mentally and physically able to perform the duties of Personal Representatives, are eighteen (18) years of age or older, () is () is not a resident of Florida, and is qualified to serve as the Personal Representative(s) under the provisions of Florida Statute, Section 733.304.
6. Petitioner(s) has/have not been convicted in any state or foreign jurisdiction of abuse, neglect, or exploitation of an elderly person or disabled adult, as those terms are defined in Florida Statute Section 825.101.
7. No persons have equal or higher preference to be appointed Personal Representatives.
8. The nature and approximate value of the assets in this Estate are:

NATURE OF ASSETS		ESTIMATED VALUE
Parcel ID:		
Legal Description:		

9. This Estate () will () will not be required to file a federal estate tax return.
10. Domiciliary or principal proceedings are not known to be pending in another state or country.
11. The decedent's Last Will and Testament dated _____ and codicil dated _____, are in the possession of the Court.

Petitioner(s) are unaware of any unrevoked will or codicil of decedent other than as set forth in paragraph 11.

Petitioner(s) request that the decedent's Last Will and Testament dated _____ and codicil dated _____, be admitted to probate and that Petitioner(s) _____ be appointed as Personal Representative(s) of the Estate of the decedent.

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

Signed on this _____ day of _____, 20__.

Signature of Petitioner

Print Name

Signature of Petitioner

Print Name

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL
CIRCUIT IN AND FOR SEMINOLE COUNTY, FLORIDA.

IN RE: ESTATE OF _____

CASE NO: _____

NOTICE OF CONFIDENTIAL INFORMATION WITHIN COURT FILING

Pursuant to Florida Rule of Judicial Administration 2.420(d)(2), the filer of a court record at the time of filing shall indicate whether any confidential information is included within the document being filed; identify the confidentiality provision that applies to the identified information; and identify the precise location of the confidential information within the document being filed.

Title/Type of Documents(s): _____

Indicate the applicable confidentiality provision(s) below from Rule 2.420(1)(B), by specifying the location within the document on the space provided:

- _____ Chapter 39 records relating to dependency matter, termination of parental rights, guardians as litem, child abuse, neglect and abandonment. §39.0132(3), Fla. Stat. (If the document is filed within a Chapter 39 case, this form is not required.)
- _____ Adoption records. §63.162, Fla. Stat. (If the document is filed within a Chapter 63 adoption case, this form is not required.)
- _____ Social Security, bank account, charge, debit, and credit card numbers in court records. §119.0714(1)(i)-(j), (2)(a)-(e), Fla. Stat. (Unless redaction is requested pursuant to §119.0714(2), Fla. Stat. this information is exempt only as of January 1, 2012).
- _____ HIV test result and patient identity within the HIV results. §381.004(2)(e), Fla. Stat.
- _____ Sexually Transmitted diseases— test results and identity within the test results when provided by the Department of Health or the department's authorized representative. §384.29, Fla. Stat.
- _____ Birth and death certificates, including court-issued delayed birth certificates and fetal death certificates. §382.008(6) and §382.025(1)(a), Fla. Stat.
- _____ Identifying information in petition by minor for waiver of parental notice when seeking to terminate pregnancy. §390.01116, Fla. Stat. (If the document is filed within a Ch. 390 waiver of parental notice case, this form is not required.)
- _____ Identifying information in clinical mental health records under the Baker Act. §394.4615(7), Fla. Stat.
- _____ Records of substance abuse service providers which pertain to the identity, diagnosis, and prognosis of and service provision to individuals who have received services from substance abuse service providers. §397.501(7), Fla. Stat.

- _____ Identifying information in clinical records of detained criminal defendants found incompetent to proceed or acquitted by reason of insanity. §916.107(8), Fla. Stat.
- _____ Estate inventories and accountings. §733.604(1), Fla. Stat.
- _____ Victim's address in domestic violence action on petitioner's request. §741.30(3)(b), Fla. Stat.
- _____ Information identifying victims of sexual offenses, including child sexual abuse. §119.071(2)(h) and §119.0714(1)(h), Fla. Stat.
- _____ Gestational surrogacy records. §742.16(9), Fla. Stat.
- _____ Guardianship reports and orders appointing court monitors in guardianship cases. §744.1076 and §744.3701, Fla. Stat.
- _____ Grand jury records. Ch 905, Fla. Stat. (If the document is filed in a Ch. 905 grand jury proceeding this form is not required.)
- _____ Information acquired by courts and law enforcement regarding family services for children. §984.06(3)-(4), Fla. Stat. (If the document is filed in a Ch. 984 family services for children case, this form is not required.)
- _____ Juvenile delinquency records. §985.04(1) and §985.045(2), Fla. Stat. (If the document is filed in a Ch. 985 juvenile delinquency case, this form is not required.)
- _____ Information disclosing the identity of persons subject to tuberculosis proceedings and records of the Department of Health in suspected tuberculosis cases. §392.545 and §392.65, Fla. Stat.
- _____ Complete presentence investigation reports. Fla. R. Crim. P. 3.712.
- _____ Forensic behavioral health evaluations under Chapter 916. §916.1065, Fla. Stat.
- _____ Eligibility screening, substance abuse screening, behavioral health evaluations, and treatment status reports for defendants referred to or considered for referral to a drug court program. §397.334(10)(a), Fla. Stat.

Signature of Petitioner

Printed Name of Petitioner

Note: The clerk of court shall review filings identified as containing information to determine whether the information is facially subject to confidentiality under the identified provision. The clerk shall notify the filer in writing within 5 days if the clerk determines that the information is NOT subject to confidentiality, and the records shall not be held as confidential for more than 10 days, unless a motion is filed pursuant to subdivision (d)(3) of Rule 2.420.

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF:

File No: _____

_____/

Deceased.

OATH OF PERSONAL REPRESENTATIVE

STATE OF _____

COUNTY OF _____

I, _____, (Affiant), state under oath that:

1. I am qualified within the provisions of sections 733.302, 733.303, and 733.304, Florida Statutes, to serve as personal representative of the estate of _____, deceased. I have reviewed the statutes and understand the qualifications. Under penalties of perjury, I certify that the following statements are true:

- a. I am 18 years of age or older.
- b. I have never been convicted of a felony.
- c. I have never been convicted in any state or foreign jurisdiction of abuse, neglect, or exploitation of an elderly person or a disabled adult, as those terms are defined in section 825.101, Florida Statutes.
- d. I am mentally and physically able to perform that duties of personal representative.
- e. I am a resident of the State of Florida, or, if I am not a resident of the State of Florida, I am:
 - ___ a legally adopted child or adoptive parent of the decedent;
 - ___ related by lineal consanguinity to the decedent; a spouse or a brother, sister, uncle, aunt, nephew, or niece of the decedent, or someone related by lineal consanguinity to any such person; or
 - ___ the spouse of a person otherwise qualified under one of the provisions above.

2. I will faithfully administer the estate of the decedent according to law.
3. My place of residence is _____, and my post office address is _____.
4. I will promptly file and serve a notice on all interested persons at any time I know that I would not be qualified for appointment and will include the reason I would not then be qualified and the date on which the disqualifying event occurred.
5. I will file and serve a notice within 20 days on all interested persons, in the event there is a change in my residence address, street address, or mailing address.

Affiant

Sworn to (or affirmed) and subscribed before me by means of _____ physical presence or _____ online notarization, this _____ day of _____, 20____, by _____.

Signature of Notary Public-
State of Florida
(Print, Type, or Stamp
Commissioned Name of Notary
Public)

Personally Known _____ or Produced Identification _____

Type of Identification Produced _____

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF

FILE No: _____

_____/
DECEASED

DIVISION _____

ORDER ADMITTING WILL TO PROBATE
AND APPOINTING PERSONAL REPRESENTATIVE
(self-proved)

The instrument presented to this Court as the last will of _____, deceased, having been executed in conformity with law, and made self-proved by the acknowledgment of the decedent and the affidavits of the witnesses, made before an officer authorized to administer oaths and evidenced by the officer's certificate attached to or following the will in the form required by law, and no objection having been made to its probate, and the Court finding that decedent died on _____, 20____, and that _____ is entitled and qualified to be Personal Representative, it is

ADJUDGED that the Last Will and Testament dated _____, 20____, and attested by _____ and _____ as subscribing and attesting witnesses, is admitted to probate according to law as the Last Will and Testament of the decedent, and it is further

ADJUDGED that _____ is appointed Personal Representative of the Estate of the decedent, and that upon taking the prescribed oath, filing the designation and acceptance of resident agent, and filing bond in the sum of \$_____, Letters of Administration shall be issued.

DONE and ORDERED on _____, 20____ in Chambers in Sanford, Seminole County, Florida.

CIRCUIT JUDGE

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF

FILE No: _____

_____/
DECEASED

DIVISION _____

LETTERS OF ADMINISTRATION
(single/multiple personal representative(s))
(testate)

TO ALL WHOM IT MAY CONCERN:

WHEREAS, _____, a resident of Seminole County, Florida, died on _____, _____, owning assets in the State of Florida, and

WHEREAS, _____, has been appointed Personal Representative of the Estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned Circuit Judge, declare _____
_____ duly qualified under the law of the State of Florida to act as Personal Representative of the Estate of _____, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

DONE and ORDERED, on _____, _____, 2022 in Chambers in Sanford, Seminole County, Florida.

CIRCUIT JUDGE

IN THE _____ COURT OF THE 18TH JUDICIAL
CIRCUIT IN AND FOR SEMINOLE COUNTY, FLORIDA

Plaintiff/Petitioner

Citation #(s): _____

vs.

Case #(s): _____

Defendant/Respondent

**DESIGNATION OF E-MAIL ADDRESS FOR A PARTY NOT REPRESENTED BY AN
ATTORNEY**

****Not to be used in cases governed by the Florida Family Law Rules of Procedure; in cases governed by the Florida Family Law Rules of Procedure, use Florida Supreme Court Approved Family Law Form 12.915****

Pursuant to Fla. R. Gen. Prac. & Jud. Admin. 2.516(b)(1)(C), I, (name) _____, designate the e-mail address(es) below for electronic service of all documents related to this case.

By completing this form, I am authorizing the court, clerk of court, and all parties to send copies of notices, orders, judgments, motions, pleadings, or other written communications to me by e-mail or through the Florida Courts E-filing Portal.

I understand that I must keep the clerk's office and the opposing party or parties notified of my current e-mail address(es) and that all copies of notices, orders, judgments, motions, pleadings, or other written communications in this case will be served at the e-mail address(es) on record at the clerk's office.

(Designated e-mail address) _____

(Secondary designated e-mail address(es) (if any)) _____

CERTIFICATE OF SERVICE

I certify that a copy hereof has been furnished to the Clerk of Court for Seminole County and (insert name(s) and address(es) of parties used for service) _____

by ☐ e-mail ☐ delivery ☐ mail on (date) _____.

(signature)

(printed name)

(e-mail address)

(address)

(phone number)

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF

FILE No: _____

_____/
DECEASED

DIVISION _____

NOTICE TO CREDITORS

The administration of the estate of _____, deceased, whose date of death was _____, _____, is pending in the Circuit Court for Seminole County, Florida, Probate Division, the address of which is P.O. Box 8099, Sanford, FL 32772-8099. The name and address of the Personal Representative are set forth below.

All creditors of the decedent and other persons having claims or demands against decedent's estate, on whom a copy of this notice is required to be served, must file their claims with this Court ON OR BEFORE THE LATER OF 3 MONTHS AFTER THE TIME OF THE FIRST PUBLICATION OF THIS NOTICE OR 30 DAYS AFTER SERVICE OF A COPY OF THIS NOTICE ON THEM.

All other creditors of the decedent and other persons having claims or demands against decedent's estate must file their claims with this court WITHIN 3 MONTHS AFTER THE DATE OF THE FIRST PUBLICATION OF THIS NOTICE.

ALL CLAIMS NOT FILED WITHIN THE TIME PERIODS SET FORTH IN FLORIDA STATUTES SECTION 733.702 WILL BE FOREVER BARRED.

NOTWITHSTANDING THE TIME PERIODS SET FORTH ABOVE, ANY CLAIM FILED TWO (2) YEARS OR MORE AFTER THE DECEDENT'S DATE OF DEATH IS BARRED.

The date of first publication of this date notice is _____.

Signed on this ____ day of _____, 20____.

SIGNATURE OF PERSONAL REPRESENTATIVE

PRINTED NAME OF PERSONAL REPRESENTATIVE

ADDRESS

IN THE CIRCUIT COURT FOR THE EIGHTEENTH JUDICIAL CIRCUIT IN AND FOR
SEMINOLE COUNTY, FLORIDA

PROBATE DIVISION

IN RE: ESTATE OF

FILE NO: _____

DIVISION: _____

DECEASED

CONSENT AND WAIVER OF NOTICE

The undersigned, whose name is _____
and who has an interest in the estate as _____
acknowledges receipt of a copy of this Petition _____
_____ heretofore filed in this proceeding, waives hearing and notice of
hearing thereon, and consents to the entry of an order granting the relief requested in the petition
without notice of hearing.

Signed on this _____ day of _____, _____.

(SIGN NAME)

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF

FILE No: _____

_____/
DECEASED

DIVISION _____

NOTICE OF ADMINISTRATION
(testate)

The administration of the estate of _____, deceased, is pending in the Circuit Court for Seminole County Florida, Probate Division, the address of which is 190 Eslinger Way, Sanford, Florida 32773. The file number for the estate is _____. The estate is testate and the dates of the decedent's will and any codicils are _____.

The name and address of the Personal Representative are set forth below.

Any interested person on whom a copy of the notice of administration is served must file with the court, on or before the date that is 3 months after the date of service of a copy of the Notice of Administration on that person, any objection that challenges the validity of the will or any codicils, venue, or jurisdiction of the court. The 3-month time period only be extended for estoppel based upon misstatement by the personal representative regarding the time period within which and objection must be filed. The time period may not be extended for any other reason, including affirmative representation, failure to disclose information, or misconduct by the personal representative or any other person. Unless sooner barred by section 733.212(3), Florida Statutes, all objections to the validity of a will or any codicils, venue or the jurisdiction of the court must be filed not later than the earlier of the entry of an order of final discharge of the personal representative or 1 year after service of the notice of administration.

Person who may be entitled to exempt property under section 732.402, Florida Statutes, will be deemed to have waived their rights to claim that property as exempt property unless a petition for determination of exempt property is filed by such persons or on their behalf on or before the later of the date that is 4 months after the date of service of a copy of the notice of

administration on such persons or the date that is 40 days after the date of termination of any proceedings involving the construction, admission to probate, or validity of the will or involving any other matter affecting any party of the exempt property.

An election to take an elective share must be filed on or before the earlier date of the date that is 6 months after the date of service of a copy of the notice of administration on the surviving spouse, an agent under chapter 709, Florida Statutes, or a guardian of the property of the surviving spouse; or the date that is 2 years after the date of the Decedent's death.

Petitioner

Address