

Case No. _____
Court: District/Probate
County: _____
Division: _____

PETITION/ORDER TO DISPENSE WITH ADMINISTRATION (Surviving Spouse/Children/Preferred Creditor)

IN RE THE ESTATE OF _____ ("Decedent")

Immediately prior to the Decedent's death, the Decedent's primary residence was at _____.

The Decedent was born on _____. The Decedent passed away on _____, 20__ in _____ [City], Kentucky. A copy of the death certificate is attached.

The Decedent's social security number is _____.

PETITION

COMES THE PETITIONER, BEING FIRST DULY SWORN, AND STATES AS FOLLOWS:

Decedent died (Check one) with without a will on the date indicated above, with residence at the address indicated above.

At the time of the Decedent's death Decedent left no estate to be administered with the exception of the following assets:

Description of Asset	Approximate Value
	\$
	\$
	\$
	\$
	\$

In relation to the Decedent, I am the: (Check all that apply)

- Surviving spouse
- Surviving child whose surviving siblings have signed a waiver herein or attached a waiver
- Preferred creditor
- Preferred creditor whose surviving spouse has signed a waiver herein or attached a waiver
- Assignee of the preferred creditor



Petitioner applies for Probate of Decedent's Will filed herewith, which is his/her Last Will and Testament.

As a preferred creditor/assignee of Decedent, I have paid the following claim(s) against the estate in the following order (see attached detail and receipts or proof of payment):

	Party Paid	Amount
Costs and expenses of administration		\$
		\$
		\$
Funeral expenses		\$
		\$
		\$
Debts and taxes with preference under Kentucky Law		\$
		\$
		\$
Other		\$
		\$
		\$

I certify that there has been no previous administration of Decedent's estate within Kentucky or outside Kentucky.

Because the exemption given to the above surviving spouse/child(ren) and/or claim(s) of the above preferred creditor/assignee equal(s) or exceed(s) the value of the above estate asset(s), I ask this Court to dispense with the administration of the above estate and to transfer the above personal property to me (or my designee, _____).

 Name of surviving spouse waiving preference Age Signature of surviving spouse waiving preference (if Petitioner is not Decedent's surviving spouse)

Address/P.O. Box Address: _____

 Name of surviving child waiving preference Age Signature of surviving child waiving preference



Address/P.O. Box Address: _____

My address is _____. My mailing address is
_____.

My telephone number is _____.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF KENTUCKY
THAT THE FOREGOING IS TRUE AND CORRECT.

PETITIONER'S SIGNATURE

Petitioner's Name: _____



STATE OF KENTUCKY
COUNTY OF _____

On _____ before me, _____, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name is subscribed to the within Affidavit, of sufficient age and competence, and acknowledged to me that he/she executed the same in his/her authorized capacity, and who, being first duly sworn on oath according to law, deposes and says that he/she has read the foregoing Affidavit subscribed by him/her, and that the matters stated herein are true to the best of his/her information, knowledge and belief.

I certify under PENALTY OF PERJURY under the laws of the State of Kentucky that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature of Notary Public

(Notary Seal)



ORDER

Upon hearing, the Will offered to was proven by _____ and ORDERED PROBATED as the Last Will and Testament of Decedent this _____ day of _____, 20_____. The Will shall be probated only and no letters of administration shall be issued.

Upon verified petition of the above petitioner, IT IS HEREBY ORDERED that the petition be granted to dispense with the administration of the estate of the above decedent, and the above personal property is transferred to petitioner or his/her designee, _____.

_____, 20 _____
Date

Judge's Signature



CERTIFICATE

I certify that this petition and order were prepared in accordance with CR 11.

Attorney for Petitioner

Address and Phone Number

