

STATE OF SOUTH CAROLINA

IN THE PROBATE COURT

COUNTY OF: _____

IN THE MATTER OF:

(Decedent)

**AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY
PURSUANT TO SMALL ESTATE PROCEEDING**

CASE NUMBER: _____

The undersigned states as follows:

1. Decedent's Information:

Full Legal Name
(include all known names): _____
Date of Birth: _____
Date of Death: _____
Age at date of Death: _____

2. ☐ Decedent was domiciled in this county at date of death:

Address: _____

County: _____ State: South Carolina.

☐ Decedent was not domiciled in **South Carolina**, but probate property of Decedent was located in this county at date of death at:

Address: _____

County: _____ State: South Carolina.

If the above address is the address of a nursing home, prison, or other residential facility, please give the last address of the Decedent prior to entering the facility: _____

3. More than thirty (30) days have passed since the Decedent's death.

4. No Application or Petition for the appointment of a Personal Representative is pending or has been granted in any jurisdiction.

5. This affidavit is pursuant to SCPC 62-3-1201. The successor(s) named herein is/are entitled to the payment of any sums of money due and owing to the Decedent, and to the delivery of all probate tangible personal property belonging to the Decedent and in the possession of another, and to the delivery of all instruments evidencing a debt, obligation, stock, or chose in action belonging to the Decedent in the following proportions. Names and addresses of the Decedent's successors (Example: heirs or devisees) are:

Name of Successor*	Year of Birth	Address	Relationship	Percentage Interest/ Amount
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

☐ See attached sheets for additional successors (check if applicable)

(*For this purpose, successors include any person(s) who has/have paid reasonable funeral expenses; attach proof of payment.)

Bank account	\$		Bank Name:	Type of Account:
Stock	\$		Company Name:	# of shares:
Unclaimed Property	\$		From:	
Motor Vehicle :	\$		VIN:	YR/MAKE: MODEL:
Mobile Home:	\$		VIN:	YR/MAKE: MODEL:
Boat/Motor/Trailer:	\$		VIN:	YR/MAKE: MODEL:
Life Insurance to estate:	\$		Company Name:	
Other Property (specify):	\$			

☐ See attached sheet for additional assets/ encumbrances (check if applicable)

SWORN to before me this _____ day of _____, 20____

Notary Public for South Carolina
My Commission Expires: _____

Affiant Signature: _____
Print Name: _____
Address: _____
Telephone (Work): _____
(Home): _____
(Cell): _____
E-mail: _____
Relationship to Decedent/Estate: _____

Name of Successor(s)	Address	Relationship	Percentage Interest/ Amount

_____, Probate Court Judge

Form # **NOTES (04/2017)**
62-3-1201, 62-3-1202