

SMALL ESTATE AFFIDAVIT

AFFIDAVIT FOR THE COLLECTION OF PROPERTY

County of _____)
State of _____) ss.

1. **THE DECEDENT.** This Small Estate Affidavit ("Affidavit") made on _____, 20____ acts as a petition regarding the estate of:

Decedent: _____, who died on _____,
20____ in the county of _____, state of
_____ ("Decedent").

A copy of the Decedent's death certificate shall be submitted along with this Affidavit.

2. **THE AFFIANT.** The name of the person preparing this Affidavit is _____ with a mailing address of _____ ("Affiant").
3. **DAYS AFTER DEATH.** The Decedent died on the Date mentioned in Section 1, which is more than the statutory limit of ____ days required to file this Affidavit.
4. **STATUTORY AMOUNT.** The estimated value of the Decedent's estate does not exceed the monetary limit of \$_____ imposed by the state of _____.
5. **PROPERTY AND ASSETS.** The property and assets of the Decedent's estate are as follows:

| <u>Description</u> | <u>Value (\$)</u> |
|--------------------|-------------------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

6. **DEBTS AND LIABILITIES.** The debts and liabilities of the Decedent's estate are as follows:

| <u>Description</u> | <u>Value (\$)</u> |
|--------------------|-------------------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

7. **THE HEIRS.** All heirs, devisees, or possible beneficiaries of the Decedent are listed below:

Heir's Name: _____ Relationship: _____
Address: _____
Phone: _____ E-Mail: _____

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Phone: _____ E-Mail: _____

Heir's Name: _____ Relationship: _____
Address: _____
Phone: _____ E-Mail: _____

Hereinafter known as the "Heirs" and shall be given notice of this Affidavit within 30 days of filing with the court.

8. **TRANSFER OF PROPERTY.** The following Heirs are entitled to the following property:

| <u>Property</u> | <u>Heir's Name</u> |
|-----------------|--------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

9. **OFFICIAL STATEMENT.** I, the Affiant, declare under penalty of perjury under the laws of the state of Governing Law that the information I have provided in this Affidavit are true and correct.

- Pending Administration. There is no pending administration of the Decedent's estate.
- Probate. There is no reasonable expectation that probate of the Decedent's estate is soon or ever shall commence.
- Governing Law. This Affidavit is governed under the laws located in the state of _____.

10. **EXECUTION.** This Affidavit is required to be signed under the requirements of state law which may require a notary public, two (2) disinterested witnesses, or both.

Affiant's Signature: _____ **Date:** _____

Print Name: _____

NOTARY ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

County of _____)
State of _____) ss.

On, _____, 20____ before me,
_____ (name and title of officer), personally appeared
_____, who proved to me on the basis of satisfactory
evidence to be the person whose name is subscribed to the within instrument and
acknowledged to me that they executed the same in their authorized capacities, and
that by their signature on the instrument the person, or the entity upon behalf of which
the person acted, executed the instrument.

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

WITNESS my hand and official seal.

Signature: _____

Print Name: _____

(seal)

WITNESS ACKNOWLEDGMENT

WITNESS 1

I, _____, have no interest in the estate nor am I related to the Decedent deceased. The statements made in this Affidavit are true to the best of my knowledge.

Witness's Signature: _____ **Date:** _____

Print Name: _____

WITNESS 2

I, _____, have no interest in the estate nor am I related to the Decedent deceased. The statements made in this Affidavit are true to the best of my knowledge.

Witness's Signature: _____ **Date:** _____

Print Name: _____