

# STATE OF NORTH CAROLINA

File No.

County

**NOTE TO APPLICANTS:** *The decision to apply for summary administration rather than regular administration may have significant legal ramifications. Applicants are advised to seek legal counsel.*

In The General Court Of Justice  
Superior Court Division  
Before The Clerk

**IN THE MATTER OF THE ESTATE OF****APPLICATION FOR PROBATE AND  
PETITION FOR  
SUMMARY ADMINISTRATION** **AND ADDENDUM (AOC-E-309)**

G.S. Ch. 28A, Art. 28

Name And Address Of Decedent

County Of Domicile At Time Of Death

Date Of Death

Date Of Will And Codicil(s), If Any

Place Of Death (if different from County Of Domicile)

Date Of Marriage

Place Of Marriage (if different from County Of Domicile)

Name And Mailing Address Of Applicant

Name And Address Of Executor Or Coexecutor Of Will (if different from Applicant)

Legal Residence (County, State)

File No.

Name And Address Of Attorney

Spoken Language Court Interpreter Needed For Any Party, Victim, Or Witness? (If Yes, identify person(s) and language(s). Interpreters provided for all court proceedings at no cost.)

 No  Yes: (explain)

I, the undersigned, apply for probate of the paper writing(s) purporting to be the decedent's Last Will and Testament and codicil(s), dated as shown above. **(NOTE: Check one of the following:)**

- The original will  and codicil(s) is already on file in the office of the Clerk of Superior Court.
- The original will  and codicil(s) is attached.
- A certified copy of the will  and codicil(s) is attached.

Upon admission of the will to probate, and upon the recording of a certified copy of said will in each county in which is located any real estate or portion of real estate wholly or partially owned by the decedent, which recording I do hereby certify, I further petition the Court for an Order Of Summary Administration of the above estate.

In support of this Application and Petition, being first duly sworn or affirmed, I say that:

1. The decedent was domiciled in this county at the time of the decedent's death.
2. I am the surviving spouse of the decedent, and I am the sole devisee and sole heir of the decedent. There is no other devisee or heir under the will.
3. The will does not prohibit summary administration. All property passing under the will, if any, goes directly to me and is not in trust. No application or petition for appointment of a personal representative is pending or has been granted in this state.
4. The decedent  did  did not own an interest in real estate, wholly or partially, at the time of the decedent's death. A complete legal description, sufficient to specifically identify each tract of such real property, is attached.
5. The decedent  did  did not own an interest in personal property at the time of the decedent's death. A complete description of the nature of decedent's personal property, the location and probable value of said property, to the extent that these facts are known or can with reasonable diligence be ascertained, is on the reverse. **(NOTE: See the instructions in form AOC-E-201 Instructions.)**
6. **To the extent of the property received by me under the will of the decedent, I assume all liabilities of the decedent that were not discharged by reason of death, and I assume liability for all taxes and valid claims against the decedent or the estate, as provided in G.S. 28A-28-6.**
7. A copy of this Petition has been personally delivered or sent by first class mail by me to the last known address, as listed above, of any executor or coexecutor named by the will, other than me.

**NOTE TO CLERK:** *This Application and Petition requires a three step process. First, the admission of the will to probate; second, the issuance of certified copies of the probated will, which the applicant must then file in each county in which any portion of the real estate is located; and third, processing the Petition For Summary Administration. For the convenience of the parties, the application and petition are collapsed onto one form.*

## INVENTORY

(Give values and descriptions as of date of decedent's death. Continue on separate attachment if necessary.)

### PART I. PROPERTY OF THE ESTATE

	Market Value
1. Accounts solely in the name of decedent (List bank, etc., account type, and balance. Do <u>not</u> list account nos.)	\$
2. Joint accounts <b>without</b> right of survivorship (List bank, etc., account type, balance, and joint owners. Do <u>not</u> list account nos.)	
% Owned By Decedent	
% Owned By Decedent	
% Owned By Decedent	
% Owned By Decedent	
3. Stocks/bonds/securities solely in the name of decedent or jointly owned <b>without</b> right of survivorship	% Owned By Decedent
4. Cash and undeposited checks on hand	
5. Household furnishings	
6. Farm products, livestock, equipment, and tools	
7. Vehicles	
8. Interests in partnership or sole proprietor businesses	
9. Insurance, Retirement Plans, IRAs, annuities, etc., payable to Estate	
10. Notes, judgments, and other debts due decedent	
11. Miscellaneous personal property	
12. Real estate willed to the Estate	\$
13. Estimated annual income of Estate	
<b>TOTAL PART I.</b>	<b>\$</b>

### PART II. PROPERTY WHICH CAN BE ADDED TO ESTATE IF NEEDED TO PAY CLAIMS

1. Joint accounts with right of survivorship (List bank, etc., account type, balance, and joint owners. Do <u>not</u> list account nos.)	\$
2. Stocks/bonds/securities registered in beneficiary form and immediately transferred on death or jointly owned with right of survivorship	
3. Other personal property recoverable (G.S. 28A-15-10)	
4. Real estate owned by decedent and not listed elsewhere	
<b>TOTAL PART II.</b>	<b>\$</b>

### PART III. OTHER PROPERTY

1. There <input type="checkbox"/> is <input type="checkbox"/> is not entireties real estate owned by decedent and spouse.	
2. There <input type="checkbox"/> are <input type="checkbox"/> are not Insurance, Retirement Plans, IRAs, annuities, etc., payable to named beneficiaries.	

#### SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

Date

Date	Signature	Signature Of Applicant
<input type="checkbox"/> Deputy CSC	<input type="checkbox"/> Assistant CSC	Name Of Applicant (type or print)
<input type="checkbox"/> Notary	Date Commission Expires	
<b>SEAL</b>	County Where Notarized	