

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF: \_\_\_\_\_ )  
 )  
IN THE MATTER OF: )  
 )  
\_\_\_\_\_) )  
(Decedent) )

IN THE PROBATE COURT

**APPOINTMENT OF AGENT FOR SERVICE OF PROCESS**

CASE NUMBER: \_\_\_\_\_

The undersigned hereby appoints the below-named person who is a resident of the State of South Carolina as his/her agent upon whom may be served all original or other lawful process in any action at law or equity related to the above estate.

The undersigned agrees that process served upon the agent herein appointed shall be of the same force and effect as if duly served upon the undersigned within the State of South Carolina.

Print Agent Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone (Work): \_\_\_\_\_  
(Home): \_\_\_\_\_  
(Cell): \_\_\_\_\_  
E-mail: \_\_\_\_\_

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Proposed/Personal Representative Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone (Work): \_\_\_\_\_  
(Home): \_\_\_\_\_  
(Cell): \_\_\_\_\_  
E-mail: \_\_\_\_\_

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**ACCEPTANCE**

I accept the above appointment as Agent on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Agent's Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_

\*Witness Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_

\*The Personal Representative is not allowed to serve as the witness.