

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

IN THE PROBATE COURT

**APPLICATION/*PETITION FOR
 SUCCESSOR PERSONAL REPRESENTATIVE**

CASE NUMBER: _____

***ONLY COMPLETE THIS SECTION IF FILING
 PETITION FOR SUBSEQUENT
 ADMINISTRATION**

* _____
 Petitioner(s)
 vs.
 * _____
 Respondent(s)

INFORMAL

***FORMAL**

The previous/original application/petition is adopted, unless noted on the amended FORM 300ES attached hereto.

The name(s) and address(es) of the most recent duly qualified and acting Personal Representative(s) for this estate is/ was: _____

If not previously filed with the Court, a copy of the above Personal Representative's death certificate, resignation or termination of appointment is attached.

The name(s) and address(es) of the proposed Successor Personal Representative(s) is/are: _____

Priority for appointment of the Successor Personal Representative is:

- named as Primary Personal Representative in Will
- named as Alternate Personal Representative in Will
- nominee of above Primary Personal Representative in Will
- nominee of above Alternate Personal Representative in Will
- surviving spouse of Decedent who is devisee of Decedent or nominee of said spouse
- other devisee of Decedent (describe): _____ or nominee of said devisee
- surviving spouse of Decedent or nominee of said spouse
- other heir of Decedent (describe): _____ or nominee of said heir
- creditor (Forty-five (45) days after death must have passed) or nominee of creditor; written statement of claim, Form #371ES, is attached
- other (describe): _____

***NOTE: IF THIS IS A FORMAL PROCEEDING, IN ADDITION TO A PETITION, YOU MUST ALSO FILE
 A SUMMONS (FORM SCCA 401PC) AND PAY THE STATUTORY FILING FEE OF \$150.00.
 A HEARING IN THE PROBATE COURT ON THE PETITION MAY BE REQUIRED.**

VERIFICATION

The undersigned, being sworn, states that the facts set forth in the foregoing statements are true to the best of the undersigned's knowledge, information and belief; and hereby submits to the Court's jurisdiction in this matter.

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

Signature: _____
Print Name: _____
Address: _____

Notary Public for South Carolina
My Commission Expires: _____

Telephone (Work): _____
(Home): _____
(Cell): _____
Email: _____

Relationship to Decedent/Estate: _____

ORDER FOR HEARING

IT IS HEREBY ORDERED that a hearing on this matter be set for:

DATE: _____
TIME: _____
PLACE: _____

Pursuant to SCPC 62-1-401, Petitioner is ordered to give notice of this hearing to all interested persons at least twenty (20) days prior to the hearing.

Executed this _____ day of _____ 20_____.

, Probate Court Judge

ORDER OF APPOINTMENT

IT IS HEREBY ORDERED that the above application/petition for Successor Personal Representative be

GRANTED DENIED and

- Fiduciary Bond in the amount of \$ _____
 - Bond not required for Personal Representative nominated by Will
 - Bond not required as Personal Representative is sole heir or sole devisee
 - Bond not required as Personal Representative is state agency, bank, or trust company
 - Bond waivers filed
 - See order dated _____
 - Other: _____
-

Executed this _____ day of _____ 20_____.

, Probate Court Judge

QUALIFICATION AND STATEMENT OF ACCEPTANCE

I accept this appointment and agree to perform the duties and discharge the trust of the office of Successor Personal Representative of this estate and hereby submit to the Court's jurisdiction in this matter.

Signature: _____
Print Name: _____
Address: _____

Telephone (Work): _____
(Home): _____
(Cell): _____
Email: _____

Attorney: _____
Address: _____

Telephone: _____
Email: _____