IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT, IN AND FOR MIAMI-DADE COUNTY, FLORIDA PROBATE DIVISION IN RE: ESTATE OF _____, Deceased. Case No.: _____ Section: _____	**CC02**

Checklist and Certification - Summary Administration – Testate

I, _____, as the attorney of record, have reviewed the applicable checklist(s) on the 11th Judicial Circuit Court's website, and filed the following pleadings to the Clerk of Court's docket, for which I have written the docket entry number next to each of the corresponding requirements below:

Qualification – Fla. Stat. § 735.201:

☐ Decedent's will does not direct administration as required by Chapter 733 Florida Statutes AND
☐ Decedent has been dead more than 2 years OR
☐ Value of the entire estate subject to administration in this state is less than $75,000

Original Documents:

_____ ☐ Authenticated copy of death certificate has been deposited with the Clerk of Courts – Fla. Prob. R. 5.171

_____ ☐ Original Will has been deposited with the Clerk of Courts

Petition for Summary Administration:

_____ ☐ Petition for Summary Administration - Fla. Prob. R. 5.530
_____ ☐ Petition is verified by all beneficiaries OR
_____ ☐ Joinder to Petition has been filed for each beneficiary OR
_____ ☐ Proof of Formal Notice has been filed for any beneficiary who is receiving their full share under the Will

Supporting Documents:

_____ ☐ Notice of Related Cases – Administrative Order 14-09
_____ ☐ Copy of paid funeral bill (not required if decedent has been dead longer than 2 years)
_____ ☐ Copy of death certificate for any deceased beneficiary
_____ ☐ Oath of Witness to Will (if Will is not self-proving under Fla. Stat. § 732.503) - Fla. Stat. § 733.201
_____ ☐ Notice of Trust (if applicable)

Proposed Orders submitted to courtMAP:

_____ ☐ Order of Summary Administration – Fla. Stat. § 735.206
_____ ☐ Order Admitting Will to Probate (Form E-1)

I HEREBY CERTIFY that I have complied with the above checklist and filed the required pleadings and supporting documentation on the date indicated above in accordance with applicable Florida Statutes, Florida Probate Rules, local rules, administrative orders, and administrative memoranda. I understand that submission of this checklist is considered an official statement subject to Fla. Stat. § 837.06.

Dated: _____

_____
Attorney's Signature
Printed Name:_____
Bar Number: _____
Email Address(es):_____

Revised: 5 - 08/2020