

IN RE: ESTATE OF _____,

Deceased.

Case No.: _____

Section: _____

CC03

Checklist and Certification – Formal Administration – Intestate – No Bond

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:

Original Documents:

_____ Authenticated copy of death certificate deposited with the Clerk of Courts - Fla. Prob. R. 5.171.

Petition for Administration:

_____ Petition for Administration - Fla. Prob. R. 5.200

_____ Waiver and Consent to Appointment of Personal Representative from majority in interest of the heirs – Fla. Stat. § 733.301(b); Fla. Prob. R. 5.201 OR

_____ Proof of Formal Notice on all persons qualified to act as personal representative and who are entitled to preference equal to or greater than petitioner - Fla. Prob. R. 5.040

Depository:

_____ Petition for Restricted Depository OR

_____ The estate contains no liquid assets.

Supporting Documents:

_____ Affidavit of Heirs (Form E-7)

_____ Copy of death certificate for any deceased beneficiary

_____ Oath of Personal Representative and Designation and Acceptance of Resident Agent - Fla. Prob. R. 5.320 and 5.110

_____ Notice of Related Cases - Administrative Order 14-09

Proposed Orders submitted to courtMAP:

Order Appointing Personal Representative (Form E-3)

Letters of Administration (Form E-4)

Order Designating Depository for Assets (if applicable) (Form E-5)

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): _____