

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT, IN AND FOR MIAMI-DADE COUNTY, FLORIDA PROBATE DIVISION IN RE: GUARDIANSHIP OF _____ Ward. Case No.: _____ Section: _____	CC-101
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Checklist and Certification – Appointment of Guardian (incapacity)

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:

- ☐ Ward has been found incapacitated and the Order of Incapacity was entered on _____.
- ☐ Petitioner is unaware of any less restrictive alternative to guardianship that would sufficiently address the needs of the Ward.

Petition for Appointment of Guardian:

- _____ ☐ Petition for Appointment of Guardian – Fla. Stat. §744.334; Fla. Prob. R. 5.560
- _____ ☐ Notarized Waiver and Consent of Ward’s Next of Kin – Fla. Stat. §744.3371; Fla. Prob. R. 5.180; OR
- _____ ☐ Proof of Formal Notice to Ward’s Next of Kin for whom a waiver and consent was not filed.

Depository:

- _____ ☐ Petition for Restricted Depository OR
- _____ ☐ Petition to Waive Restricted Depository for Social Security Benefits only OR
- _____ ☐ A depository is not required as only a Guardian of the Person is being appointed.

Supporting Documents (ALL must be filed):

- _____ ☐ Guardianship Application (11th Judicial Circuit Form) – Fla. Stat. §744.3125; Fla. Prob. R. 5.590
- _____ ☐ Submission of fingerprints via Livescan and FDLE Report is filed to the docket – Fla. Stat. §744.3135
- _____ ☐ Copy of credit history check – Fla. Stat. §744.3135;
- _____ ☐ Oath of Guardian and Designation and Acceptance of Resident Agent – Fla. Stat. §744.347; Fla. Prob. R. 5.110 and 5.600
- _____ ☐ Affidavit of Kin (Form G-8). A Supplemental Affidavit (Form G-XSD) must only be filed when additional space is needed.
- _____ ☐ Notice of Related Cases (smart form) – Administrative Order 14-09

Proposed Orders submitted to courtMAP:

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|----------------------------|--|---|---|
| Order Appointing Guardian: | ☐ of the Person <u>and</u> Property
(Form G-1) | ☐ Limited
(Form G-13) | ☐ Of the Property or Person only
(Form G-7 or G-13) |
| Letters of Guardianship: | ☐ of the Person <u>and</u> Property
(Form G-2) | ☐ Limited
(Form G-12) | ☐ Of the Property or Person only
(Form G-12) |
- ☐ Order Designating Depository for Assets (Form G-5) OR
☐ Order Waiving Depository Requirements for Social Security Benefits (Form A-10)

I HEREBY CERTIFY that I have complied with the above checklist and filed the required pleadings and supporting documentation 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): _____