City of Staunton Circuit Court Clerk's Office
Probate Information Form

1. Decedent's Full Name (exactly as is appears on Death Certificate):

   _____

2. Decedent's Full Name as is appears on the will & codicil(s), if applicable:

   _____

3. Marital Status: ☐ Married ☐ Widowed ☐ Divorced ☐ Other: _____

4. Decedent's residence address at death:

   _____

5. Date of Birth: _____

6. Date of Death: _____ Place of Death: _____

7. Was the Decedent a City of Staunton resident: ☐ Yes ☐ No

   If 'no', please list the jurisdiction the decedent was residing in at time of passing:

   _____

8. Was the decedent in a nursing home at the time of death? ☐ Yes ☐ No

   If 'yes', where did the decedent reside prior to entering the nursing home?

   _____

9. Decedent died: ☐ With a will (and codicils, if applicable) ☐ Without a will

10. Date of Will: _____ Date of Codicil(s) (if applicable): _____

11. Are you a person under a disability? ☐ Yes ☐ No
    If 'yes', please explain:

    _____

12. Have you ever been convicted of a felony? ☐ Yes ☐ No
    If 'yes', please provide date of conviction and nature of charge:

    _____

13. Have you ever filed for bankruptcy? ☐ Yes ☐ No
    If 'yes', please provide year bankruptcy was closed:

    _____

14. Are you now, or have you ever been, an attorney at law in Virginia or elsewhere? ☐ Yes ☐ No
    If 'yes', and you do not now possess an active license from the Virginia State Bar, explain details:

    _____

**An administrator is the person who settles the estate of a person who died without a will. An executor does this task if there is a Will nominating the executor. Sometimes no work is necessary to settle an estate under a Will, but the Will is probated and recorded to establish the identity of the persons who receive real estate and to serve as their title to this real property. This can be the same as the person making the request or another person nominated by the requestor. State law gives certain persons a right to appointment and upon how many days have elapsed since the death of the decedent. **

Fiduciary:

Please fill out the following information for **ALL PERSONS** probating and/or seeking appointment:

**If the person seeking appointment is NOT a Virginia resident agent, you will need a Virginia Resident to either co-qualify as executor/administrator or to be appointed as the resident. If the Virginia resident will co-qualify with you, they must appear at the appointment with you. **

A. Name:_____
Address:_____
Cell Phone #:_____Work Phone:_____
Email Address:_____
Relationship to Decedent: _____

Does an attorney represent the Fiduciary: ☐ Yes ☐ No

If 'yes', please provide attorney Information:

Name:_____

Address:_____

Phone #:_____

Additional Fiduciaries: (if applicable)

B. Name:_____
Address:_____
Cell Phone #:_____Work Phone:_____
Email Address:_____
Relationship to Decedent: _____

C. Name:_____
Address:_____
Cell Phone #:_____Work Phone:_____
Email Address:_____
Relationship to Decedent: _____

Heirs at Law

Heirs at law are required to be listed. The heirs at law are next of kin according to §64.2-200 and do not necessarily inherit under the will. If you have any questions, please refer to Virginia Code §64.2-200.

Heir 1
Name: _____
First Middle Last
Age:_____
Address:_____
Street
_____ _____ _____
City State Zip Code
Relationship to Decedent:_____

Heir 2
Name: _____
First Middle Last
Age:_____
Address:_____
Street
_____ _____ _____
City State Zip Code
Relationship to Decedent:_____

Heir 3
Name: _____
First Middle Last
Age:_____
Address:_____
Street
_____ _____ _____
City State Zip Code
Relationship to Decedent:_____

Heir 4
Name: _____
First Middle Last
Age:_____
Address:_____
Street
_____ _____ _____
City State Zip Code
Relationship to Decedent:_____

For additional heirs, please record information on a separate sheet and attach to end of this form

Estate Value:

The approximate value of personal assets held in the decedent's name **only**: $_____

*(This includes any and all accounts (i.e. bank accounts, insurance policies, stocks, etc.) that do not have a joint account holder OR a beneficiary) *

The fair market value of decedent's real estate and the county/city it is located in.

	Address (Property Located in Virginia)	City/County	Fair Market Value
1.			
2.			
3.			

	Address (Property Outside Virginia)	City, State, Zip	Fair Market Value
1.			
2.			
3.			

Form Completed By:_____(Printed Name)

Signature:_____ Date:_____

For Clerk's Office Only:

- Proof of death: ☐ Death Certificate ☐ Other: _____
- Type of Will: ☐ Attested ☐ Holographic ☐ Self-Proving ☐ Other:_____
- Surety waived by will? ☐ Yes ☐ No
  - Surety Company (if needed): _____
- Depositions Needed? ☐ Yes ☐ No
- Please select appointment type:

  ☐ Executor Qualification ☐ Administrator Qualification

  ☐ Probate of Will only ☐ Other:_____
- Real Estate? ☐ Yes ☐ No
  - Real Estate outside Staunton? ☐ Yes ☐ No
  - Real Estate outside Virginia? ☐ Yes ☐ No
- Estate Value
  - Personal:_____ Real Estate:_____
    - Total Estate Value:_____