### \*\*\*These forms are not a substitute for legal advice.\*\*\*

#### **SMALL ESTATE AFFIDAVIT**

# This form packet contains these documents:

- 1. Small Estate Affidavit
- 2. Affidavit of Disinterested Person (2)
- 3. Order

# **Steps to Follow:**

- **1. Prepare the Small Estate Affidavit.** When preparing these forms, the "Decedent" is the person who is deceased. It is perfectly all right to hand-write on the forms.
- **2.** Each Distributee must sign the Affidavit in front of a Notary Public. DO NOT sign the Affidavit UNTIL you are in front of the Notary.
- **3.** You will need TWO disinterested people to sign Affidavits of Disinterested Person. A disinterested person is anyone who is not less than 18 years of age, is not related to the decedent, and is not a party to or interested in the outcome of this suit.
- 4. Make at least two additional copies of each Affidavit to take with you when you file.
- **5. File the Small Estate Affidavit and both Affidavits of Disinterested Person** with the Clerk of the Probate Court on the first floor of the courthouse located at 2100 Bloomdale Road in McKinney. Give the Clerk the **Order** for the judge to sign.

***These forms are not a substitute for legal advice.***

This page intentionally left blank.

Case No.

In the Estate of		In the Probate Court	
[Decedent's name] <b>Deceased</b>	,   	County,	
	SMALL ESTATE AF	FIDAVIT	
O THE HONORABLE	UDGE OF THIS COURT:		
		_ [name of 1st applicant], wh	no resides at:
address], zip code]	[city],	[state]	
and			
		_ [name of 2 <sup>nd</sup> applicant], w	ho resides at:
address],zip code]	[city],	[state]	
and			
		_ [name of 3 <sup>rd</sup> applicant], wl	no resides at:
address], zip code]	[city],	[state]	
and			
		_ [name of 4 <sup>th</sup> applicant], wh	no resides at:
address], zip code]	[city],	[state]	
	e(s), furnish the following in		
1 He/she died on		[date of passing] in tate] at the age of	
1. The/sine died on	10171		

[addr	ess],	[city],		[zip code] and/or
the pi	rincipal part of the estat	e was in this County at the	he time of de	ath.
	o application for the apping or has been granted.	pointment of a personal r	epresentative	e of this estate is
5. He	e/she died intestate (wit	hout a will).		
6. Tł	hirty (30) days, or more,	have elapsed since the	death.	
home		sets of the estate as of the erty, does not exceed \$50 ilities of the estate.		,
8. Tł	he known ASSETS and	LIABILITIES of the est	ate are as fol	lows:
		ASSETS		
	should indicate w	nclude complete descrip hether property is separ and whether the proper	ate or comm	unity,
DESCRIPTI	ON	•	VALUE	ENCUMBRANCES
		LIABILITIES		
	-	ıld include a complete do whether the debt was cor		
CREDITOR			AMO	UNT OF CLAIM

		e following by placing through those not selec		
_ 9. He/she	e was married to			[name of
decedent	's spouse] at the time of	of death.		
_ 9. He/she	e was never married.			
_ 9. He/she		e time of death, but wa	-	
		e following by placing through those not selec		
_ 10. He/sh	ne had no children.			
10 He/sh	ne had children whose	names are:		

\*\*\*These forms are not a substitute for legal advice.\*\*\*

11. The names and addresses of the Distributees and heirs of the money and property of the estate and their right to receive the assets of the estate is/are:

#### **DISTRIBUTEES**

[The distributee list should include a complete listing of all Distributees, their residence addresses, relationship to the Decedent, and their respective right to receive the money, property, or other rights of the estate as are found to exist. The list should also identify any Distributees who are minors or under a guardianship.]

11	
Share of Estate: Relationship:	Age:
Name of 2 <sup>nd</sup> Applicant:	
Share of Estate:	
Relationship:	Age:
Name of 3 <sup>rd</sup> Applicant:	
11	
Share of Estate:	
Relationship:	Age:
Name of 4 <sup>th</sup> Applicant:	
Share of Estate:	
Relationship:	
Applicant(s)/Distributee(s) affirm	that the facts contained in this Affidavit are true.
Estate Records; that the same be approved thereof in order to allow Applicant(s)/Dis	nat this Affidavit and Application be filed in the Small d by the Court; and that the Clerk issue certified copies stributee(s) to receive or to take custody or possession of ences of such money, property, or other rights of the them as heirs or assignees.
	[Signature of 1 <sup>st</sup> Applicant]
	[Typed or printed name]

STATE OF	
COUNTY OF	
Sworn to and Subscribed before me on _	[date], by
	[name of 1 <sup>st</sup> Applicant].
	[Signature of Notary Public]
	[Typed or printed name]  Notary Public in and for the State of  My commission expires:
	[Signature of 2 Applicant]
	[Typed or printed name]
	[Typed of printed name]
STATE OF	
COUNTY OF	
Sworn to and Subscribed before me on _	[date], by
	[name of 2 <sup>nd</sup> Applicant].
	[Signature of Notary Public]
	[Typed or printed name]  Notary Public in and for the State of  My commission expires:
	[Signature of 3 Applicant]
	[Typed or printed name]

STATE OF	
COUNTY OF	
Sworn to and Subscribed before me on _	[date], by
	[name of 3 <sup>rd</sup> Applicant].
	[Signature of Notary Public]
	[Typed or printed name]  Notary Public in and for the State of  My commission expires:
	[Signature of 4 <sup>th</sup> Applicant]
	[Typed or printed name]
STATE OF	
COUNTY OF	
Sworn to and Subscribed before me on _	[date], by [name of 4 Applicant].
	[Signature of Notary Public]
	[Typed or printed name]  Notary Public in and for the State of  My commission expires:

***These forms are not a substitute for legal advice.***
This page intentionally left blank.

Case No	
In the Estate of	In the Probate Court
[Decedent's name]  Deceased	County,
AFFIDAVIT OF FIRST DI	SINTERESTED PERSON
'I have no interest in the estate ofname].	[decedent's
'I am not related to him/her under the laws of de	scent and distribution of the State of
'I have personal knowledge of the facts containe contained in the foregoing Affidavit are true."	d in the foregoing Affidavit. The facts
	[Signature of 1 <sup>st</sup> Disinterested Person]
	[Typed or printed name]
	[Address & telephone no.]
STATE OF	
COUNTY OF	
Sworn to and Subscribed before me on	[date] by
	[name of 1 <sup>st</sup> Disinterested Person].
	[Signature of Notary Public]
	[Typed or printed name] Notary Public in and for the State of My commission expires:

Case No	
In the Estate of	In the Probate Court
[Decedent's name]  Deceased	   County,
AFFIDAVIT OF SECOND I	DISINTERESTED PERSON
"I have no interest in the estate ofname].	[decedent's
"I am not related to him/her under the laws of des	scent and distribution of the State of
"I have personal knowledge of the facts contained contained in the foregoing Affidavit are true."	d in the foregoing Affidavit. The facts
	[Signature of 2 <sup>nd</sup> Disinterested Person]
	[Typed or printed name]
	[Address & telephone no.]
STATE OF	
COUNTY OF	
Sworn to and Subscribed before me on	[date] by [name of 2 Disinterested Person].
	[Signature of Notary Public]
	[Typed or printed name]  Notary Public in and for the State of  My commission expires:

\*\*\*These forms are not a substitute for legal advice. \*\*\* This page intentionally left blank.

Case No	
In the Estate of	In the Probate Court
[Decedent's name]  Deceased	County,
O	RDER
Affidavits of the two disinterested persons in a Affidavits comply with the terms and provision	ons of the Estates Code, that this Court has es under the provisions of the Estates Code as a
APPROVED, and shall forthwith be recorded the Clerk of this Court shall issue certified cop Applicant(s)/Distributee(s) to receive or to take	e foregoing Affidavit be and the same is hereby in the Small Estates Records of this County, and pies thereof to all persons entitled thereto to allow see custody or possession of the property of the roperty, or other rights of the estate as are found to
SIGNED on	[date].
	JUDGE PRESIDING