|  |
| --- |
| **Petition for Year’s Support**INSTRUCTIONSI. Specific Instructions1. This form is to be used for filing a Petition for Year’s Support pursuant to O.C.G.A. § 53-3-1 et seq.
2. The amount set apart shall be an amount sufficient to maintain the standard of living that the surviving spouse and each minor child had prior to the death of the testator or intestate, for a period of twelve (12) months, taking into consideration the following: (1) the support available to the individual for whom the property or money is to be set apart, from sources other than year’s support, including but not limited to any separate estate and earning capacity of that individual; and (2) such other relevant criteria as the court deems equitable and proper, including the solvency of the estate.
3. This Petition must be filed within twenty-four (24) months after decedent’s death.
4. The Petitioner or his/her/their attorney must prepare and file with the Court, no later than the date of the Final Order, a Georgia Department of Revenue Form PT-61 for each parcel of real property located in the State of Georgia shown on Exhibit A.
5. Paragraph 4 requires sufficient factual information for the Court to conclude that those listed in paragraph 3 include each and every heir of the decedent and that there are not additional heirs of the same or closer degree according to O.C.G.A. §53-2-1. These facts must allow the Court to rule out the possibility that there may be other heirs of similar or closer degree that have not been listed. Provide the date of death of any deceased heirs and the name of the Personal Representative if applicable. The Personal Representative of a deceased heir is authorized to consent on behalf of that heir. O.C.G.A. §53-7-1. NOTE: If you are uncertain how to determine the heirs of a decedent, refer to the “Heirs Determination Worksheet” available from the Probate Court or at www.gaprobate.org. Examples of such statement would be: (a) “decedent was or was not married at the time of his death and had no children born, adopted, living or deceased, other than listed herein”; (b) “decedent had no other siblings half or whole other than those listed herein”; (c) “the decedent’s brother who died previously, had no other children born, adopted, living or deceased, other than listed herein.”
6. Exhibit “B” also requires that the Tax Commissioner be listed for each county in which there is real property owned by the decedent.
7. According to Probate Court Rule 5.6 (A), unless the Court specifically assumes the responsibility, it is the responsibility of the moving party to prepare the proper citation and deliver it properly so it can be served according to law. Pages after page 10 are to be completed by the moving party, unless otherwise directed by the court.

II. General Instructions General instructions applicable to all Georgia Probate Court Standard Forms are available in each probate court, labeled GPCSF 1. |
| **IN THE PROBATE COURT****COUNTY OF BIBB****STATE OF GEORGIA****IN RE: ESTATE OF )** **)** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_****DECEASED )** |

**PETITION FOR YEAR’S SUPPORT**

The Petition of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

whose physical address(es) is/are \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 Street City County State Zip Code

and mailing address(es) is/are \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 Street City County State Zip Code

shows to the Court the following:

1.

 The Petitioner is:

 \_\_\_\_\_ a. The surviving spouse who has not married since the death of the decedent.

 \_\_\_\_\_ b. A guardian or other individual acting on behalf of the minor child(ren),

who have not turned 18 prior to the filing of this Petition and have not married (state specific relationship): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 (Full name of decedent) First Middle Last

whose place of domicile was \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 Street City County State Zip Code

departed this life on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

2.

(Initial one)

 \_\_\_\_\_ a. There is not a Will.

 \_\_\_\_\_ b. There is a Will, which has been offered for probate.

\_\_\_\_\_ c. There is a Will, which will be offered for probate.

\_\_\_\_\_ d. There is a Will, which will not be offered for probate but is hereby filed with this Petition or is already on file with this Court.

3.

Listed below are all of the decedent's heirs at law, with the age or majority status, address and relationship to the decedent set opposite the name of each. **LIST ANY AND ALL HEIRS. FOR ANY MINOR HEIR, INCLUDE THE DATE OF BIRTH AND THE NAME AND ADDRESS OF THE PARENT OR GUARDIAN.**

Name Date of Birth Address Relationship

 (Or over 18)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.

 **Required**: Provide sufficient factual information to enable the Court to conclude that all of the heirs of the decedent are included and that there are no heirs of similar or higher degree according to O.C.G.A. §53-2-1. Provide the names of any deceased heirs and include the date of death for each. (See instructions for further clarification.) Also, state here all pertinent facts which may govern the method of giving notice to any party and which may determine whether or not a guardian ad litem should be appointed for any party. If any heirs listed above are cousins, grandchildren, nephews or nieces of the decedent, indicate the deceased ancestor through whom they are related to the decedent.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| 5. Petitioner shows that the above named minor child(ren) of said decedent, to wit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and/or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Full Name of Surviving Spouse, if applicable) (is) (are) entitled, before the payment of debts of the decedent, to an allowance called Year’s Support, which Petitioner hereby claims for the individual(s) named above. |
| 6.The decedent's estate consists of real and/or personal property of the probable value of ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dollars. |

7.

 A schedule of the property or a statement of the amount of money, or both, which the Petitioner proposes to have set aside to the following individuals:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(list the full name of the individuals whom the Petitioner proposes the year support be set aside to, usually the spouse and minor children). The schedule is attached hereto as “Exhibit A” and made a part hereof.

8.

(Select “A” or “B,” and strike inapplicable words)

\_\_\_\_\_ (a) (There is no executor or administrator of this estate) (The Petitioner is the executor or administrator of this estate) and therefore Petitioner has set forth below by affidavit marked “Exhibit B” and made a part hereof a list of all interested persons, who must be given notice of this Petition.

\_\_\_\_\_ (b) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 (is) (are) the acting executor(s) or administrator(s) of this estate and must

 receive notice of this Petition. Note: “Exhibit B” is not required.

9.

In addition to all taxes and tax liens on real property accrued for years prior to the year of the decedent’s death, Petitioner elects to have property taxes on any real property set apart as year’s support divested as follows:

(Only select one)

\_\_\_\_\_ (a) Real property taxes accrued in the year of decedent’s death;

\_\_\_\_\_ (b) Real property taxes accrued in the year in which this Petition is filed; or

 \_\_\_\_\_ (c) Real property taxes accrued in the year following the filing of this Petition if this Petition is filed in the year of the decedent’s death.

10.

Additional Data: Where full particulars are lacking, state here the reasons for any such omission.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WHEREFORE, Petitioner prays:

 1. That this Petition be accepted and filed.

 2. That notice issue and be published and served as described above.

 3. That any interested person who is a minor or an incapacitated adult have a guardian ad litem appointed for him or her.

 4. That this Court grant such other and further relief as it deems proper under the circumstances.

 This \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_\_.

|  |  |
| --- | --- |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of the Petitioner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name of the Petitioner\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone Number |
| Signature of Attorney: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Typed/printed name of Attorney: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State Bar # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**EXHIBIT “A” SCHEDULE OF REAL AND PERSONAL**

**PROPERTY FOR YEAR’S SUPPORT**

 [NOTE: If the Petitioner proposes to have set aside any interest in real property, then the complete legal (metes and bounds) description of the real property and the interest therein must appear in full on this schedule and on the proposed Certificate of Order of Year’s Support (page 9).]

 The following is a schedule of the property or a statement of the amount of money or both which the Petitioner proposes to have set aside as year’s support:

|  |
| --- |
|  |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**PETITION FOR YEAR’S SUPPORT**

**EXHIBIT “B” LIST OF INTERESTED PERSONS**

 (To be completed if (1) there is not an appointed executor or administrator of the estate, or (2) if the Petitioner has been appointed the executor or administrator of the decedent’s estate.) In the event there is a Last Will and Testament the named beneficiaries must be listed here as interested persons.

 Petitioner hereby certifies that he/she has made reasonable inquiry to ascertain the names, last known addresses, and ages (if under 18) of all the interested persons with respect to the within matter. Petitioner understands that, for purposes of this affidavit, the term “interested person” refers to the above-named decedent’s children, spouse, other heirs, beneficiaries, creditors, and any others having a property right or claim against the estate which may be affected by the above Year’s Support proceeding, including but not limited to the Tax Commissioner for each county in which there is real property owned by the decedent. Petitioner hereby certifies that the following are all of the interested persons known to Petitioner with respect to this matter and that any incapacitated adults are identified as such. (Those who have acknowledged service need not be listed.) For each individual named put the appropriate letter to show the relationship to the Decedent – Heir (H), Beneficiary (B), Creditor (C), or Other (O). Be advised both Heirs and Beneficiaries should be listed when there is a Will:

Name Last Known Address Age (or over 18) Relationship

 to Decedent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VERIFICATION**

**GEORGIA, BIBB COUNTY**

 Personally appeared before me the undersigned Petitioner(s) who, after being duly sworn, state(s) that the facts set forth in the foregoing Petition and the attached exhibits are true and correct.

|  |  |
| --- | --- |
| Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY/CLERK OF PROBATE COURT My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Petitioner\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name of Petitioner |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**ACKNOWLEDGMENT OF SERVICE AND CONSENT TO**

**AWARD OF YEAR’S SUPPORT**

 We, the undersigned, being over 18 years of age, laboring under no legal disability and being interested persons hereby acknowledge service of the Petition for Year’s Support along with the attached exhibits and notice, waive all further service and notice, and hereby consent to the award of year’s support as proposed in the Petition and attached exhibits.

|  |  |
| --- | --- |
| Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY/CLERK OF PROBATE COURT My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY/CLERK OF PROBATE COURT My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY/CLERK OF PROBATE COURT My Commission Expires\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Interested Person\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Interested Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Interested Person\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**CERTIFICATE OF ORDER OF YEAR'S SUPPORT**

**(Pursuant to O.C.G.A. §53-3-11)**

DATE ORDER GRANTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GRANTOR: (NAME OF DECEDENT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GRANTEE: (FULL NAME OF EACH PERSON AWARDED YEAR’S SUPPORT. The surviving spouse and/or minor children)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS OF GRANTEE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LEGAL DESCRIPTION OF REAL PROPERTY AND INTEREST THEREIN:

Also land in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County(ies).

|  |
| --- |
| Original Certificate delivered or mailed to Clerk of Superior Court of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_. |
| Certificate prepared by:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State Bar # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE OF ATTORNEY I do hereby certify that the above information is based on the order of the Probate Court issued on the date set out above and that the above information is true and correct.By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ P.O. Box 6518, Macon, Georgia 31208 Clerk/Deputy Clerk of the Probate Court Probate Court Return Mailing Address |

|  |
| --- |
| **NOTICE:****THE FOLLOWING PAGES ARE TO BE COMPLETED BY THE PETITIONER (MOVING PARTY) UNLESS OTHERWISE DIRECTED BY THE COURT.****SEE PROBATE COURT RULE 5.6 (A)** |
|  |
|  |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**ORDER FOR APPOINTMENT OF GUARDIAN AD LITEM**

 IT IS ORDERED that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Address Telephone Number

is appointed guardian ad litem for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 (minor)(unborn heir)(and the unknown heir), and that said guardian ad litem be duly served with a copy of the foregoing Notice, Petition, and notice of this appointment, and that upon said guardian ad litem’s acceptance of same, said guardian ad litem shall make answer hereto. This appointment is limited to this proceeding only and it shall cease when a final order is entered on this Petition.

(Note: Appoint more than one guardian ad litem if necessary to represent parties who are not sui juris and who may have adverse interests.)

 SO ORDERED this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

|  |  |
| --- | --- |
|   | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sarah S. HarrisJudge of the Probate Court |

**IN THE PROBATE COURT**

**COUNTY OF**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

|  |
| --- |
| **ANSWER OF GUARDIAN AD LITEM** I hereby accept the foregoing appointment, acknowledge service and notice of the proceedings as provided by law, and for answer say: |

 This \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

|  |
| --- |
| Signature of Guardian Ad Litem (GAL): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Typed/printed name of GAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone Number: \_\_\_\_\_\_\_\_\_\_­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**PETITION FOR YEAR’S SUPPORT**

**ORDER FOR NOTICE**

The Petition for Year’s Support having been filed in this office, let notice issue and be published once a week for four (4) weeks as required by law.

Further, it appearing that the estate (is) (is not) represented by a person other than the Petitioner, let the clerk of this Court mail a copy of the notice in this matter to (such representative other than the Petitioner) (all interested persons listed in “Exhibit B” to the Petition, except those who have acknowledged service).

It is further ordered that the clerk of this Court must mail a copy of the Petition within five (5) days of its filing to the tax commissioner or tax collector of any county in this state in which real property is proposed to be set apart is located.

|  |
| --- |
|  SO ORDERED this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sarah S. Harris Judge of the Probate Court |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**NOTICE OF PETITION TO FILE FOR YEAR’S SUPPORT**

The Petition of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, for a year’s support from the estate of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, deceased, for decedent’s (surviving spouse) (and) (minor child\_\_\_\_), having been duly filed, all interested persons are hereby notified to show cause, if any they have, on or before \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_, why said Petition should not be granted.

All objections to the Petition must be in writing, setting forth the grounds of any such objections, and must be filed on or before the time stated in the preceding sentence. All pleadings/objections must be signed before a notary public or before a probate court clerk, and filing fees must be tendered with your pleadings/objections, unless you qualify to file as an indigent party. Contact probate court personnel at the following address/telephone number for the required amount of filing fees. If any objections are filed, a hearing will be scheduled at a later date. If no objections are filed the Petition may be granted without a hearing.

|  |  |  |  |
| --- | --- | --- | --- |
| DATE:PUBLICATION DATES:FOUR INSERTIONS ONLYCHECK/MO NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_ ATTACHED FOR: $85.00ATTORNEY: **COURT REQUEST AFFIDAVIT** | SARAH S. HARRIS Judge of the Probate CourtBy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Clerk/Deputy Clerk of the Probate CourtProbate Court of Bibb CountyBibb County Courthouse, Room 207P O Box 6518Macon, Georgia 31208(478) 621-6494 |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Judge of the Probate CourtBy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Clerk/Deputy Clerk of the Probate Court |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**CERTIFICATE OF SERVICE FOR YEAR’S SUPPORT**

(Notice should be given to all interested parties included in Exhibit B and the Personal Representative, if one has been appointed, of the Decedent’s estate and the Tax Commissioner for any County in which the Decedent owned property, must be listed here):

I certify that I have on this date mailed, unless otherwise noted, in an envelope with the proper postage affixed thereto for first-class mail delivery a copy of the notice to the following parties at the addresses below.

|  |
| --- |
| This \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Clerk/Deputy Clerk of the Probate CourtProbate Court of Bibb CountyBibb County Courthouse, Room 207P. O. Box 6518Macon, Georgia 31208(478) 621-6494 |
|  |  |

**IN THE PROBATE COURT**

**COUNTY OF BIBB**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

**FINAL ORDER FOR YEAR’S SUPPORT**

 The Petition for a Year’s Support for decedent’s (surviving spouse) (minor child\_\_\_\_\_), setting forth the property sought to be set aside as a year’s support, was filed; notice was issued, published, and served as required by law; and no objection was filed to the Petition.

 WHEREFORE IT IS ORDERED that the Petition is granted and the schedule of property is made the award of this court, and further that property taxes on any real property awarded hereby shall be divested as elected in the Petition.

 SO ORDERED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sarah S. Harris

Judge of the Probate Court

FILED

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dep Clerk