**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ) ESTATE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_ DECEASED *(name as it appears in will)* )**

**PETITION TO PROBATE WILL IN SOLEMN FORM AND FOR**

 **WAIVERS OF BOND AND GRANT OF CERTAIN POWERS**

The petition of ,

 ***(name as it appears in will)***

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.

 ,

 ***(Decedent name as it appears in will)***

whose place of domicile was ,

 Street City County State Zip Code

departed this life on , 20 .

2.

 While alive, decedent duly made and published a Last Will and Testament dated

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, which is herewith offered for Probate in Solemn Form (also offered for Probate are Codicil(s) dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_). Your petitioner(s) is/are named as the Executor(s).

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:

Name Age (or over 18) Address Relationship

 **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 the same or closer degree according to O.C.G.A. § 53-2-1. Provide the names of any deceased heirs, the name and address of his or her Personal Representative, if any, and include the date of death for each. [See instructions for further clarification.] Also, state here all pertinent facts that may govern the method of giving notice to any party and that 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. If any executor nominated in the Will has a priority equal to or higher than the Propounder but will not qualify, indicate the name and reasons.]*

5.

(Initial one)

\_\_\_\_\_ (a) To the knowledge of the Petitioner(s), no other proceedings with respect to this estate are pending, or have been completed, in any other probate court in this state.

 (b) The probate of another purported Will of the decedent is pending in the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the \_\_\_\_\_\_\_\_\_\_ County Probate Court. The names and address(es) of the propounder(s) and the names, addresses and ages or majority status of the beneficiaries under the other purported Will to whom notice is required under O.C.G.A. §53-5-22(b) are listed on the attachment hereto, which is expressly made a part hereof, as if fully set forth herein.

 (c) An Administration is pending in the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Court. The name(s) and address(es) of each Petitioner and the name(s) and address(es) of any appointed Administrator(s), if any, are listed on the attachment hereto, as Exhibit “\_\_\_\_,” which is expressly made a part hereof, as if fully set forth herein.

6.

*[Initial if applicable; however, please note that this form may not be appropriate if the Petitioner(s) is/are seeking the appointment of a Testamentary Guardian, which requires notice to the relatives of the Decedent’s minor child(ren) pursuant to O.C.G.A. § 29-2-4.]*

At the time of the Decedent’s death, and at this time, the Decedent left (a) minor child(ren) and the Will names a Testamentary Conservator.

\_\_\_\_\_\_\_\_ (a) The Will names a Testamentary Conservator of (a) minor child(ren) of the Decedent. At the time of the Decedent’s death, he/she had (a) minor child(ren) and there is/are no court-appointed Conservator(s); the following individual(s) is/are named as Testamentary Conservator(s) in the Decedent’s Will:

Name Address

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

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

\_\_\_\_\_\_\_\_ (b) The Will names a Testamentary Conservator of (a) minor child(ren) of the Decedent. At the time of the Decedent’s death, he/she had (a) minor child(ren) and there is/are a court-appointed Conservator(s), who is/are identified as follows: *[NOTE, if named Testamentary Conservator(s) and court-appointed Conservator(s) are different.]*

Name Address

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

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

7.

 All **beneficiaries** have consented to the waiver of bond and/or grant of certain powers contained in O.C.G.A. §53-12-261 to the personal representative. Therefore, the Petitioner(s) hereby move the court to publish notice of the filing of the Petition and tender(s) with this Petition publication fees. The beneficiaries of the Will are identified as follows:

Name Address

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

**This only applies if all beneficiaries have properly selected, acknowledged and consented to this option.**

8.

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

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

WHEREFORE, Petitioner(s) pray(s):

1. Leave to prove said Will (and Codicil(s)) in Solemn Form;
2. That due and legal notice be given as the law requires;
3. That said Will be admitted to record on proper proof;
4. That Letters of Testamentary Conservatorship issue, if applicable;
5. That Letters Testamentary issue; and
6. That this Court order such other relief as may be proper under the circumstances.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature of First Petitioner |  | Signature of Second Petitioner, if any |
|  |  |  |
| Printed Name |  | Printed Name |
|  |  |  |
| Mailing Address |  | Mailing Address |
|  |  |  |
|  |  |  |
| Telephone Number |  | Telephone Number |
| Signature of Attorney |  |
| Printed Name of Attorney |  |
| Address |  |
|  |  |
| Telephone Number |  | State Bar # |  |

**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.

Sworn to and subscribed before me this

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

 Signature of First Petitioner

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

NOTARY/CLERK OF PROBATE COURT Printed Name of First Petitioner

My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sworn to and subscribed before me this

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

 Signature of Second Petitioner

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

NOTARY/CLERK OF PROBATE COURT Printed Name of Second Petitioner

My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

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

**DECEASED )**

|  |
| --- |
| **ACKNOWLEDGMENT OF SERVICE AND****ASSENT TO PROBATE INSTANTER BY HEIRS** We, the undersigned, being 18 years of age or older, laboring under no legal disability and being **heirs** of the above-named decedent, hereby acknowledge service of a copy of the Petition to Probate the Will in Solemn Form, purported Will, and notice, waive copies of same, waive further service and notice, and hereby assent to the probate of said Will in Solemn Form instanter.  |
| Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY/CLERK OF PROBATE COURT My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Heir\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name of Heir |
| Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY/CLERK OF PROBATE COURT My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Heir\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name of Heir |
| Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOTARY/CLERK OF PROBATE COURT My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Heir\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name of Heir |

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

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

**DECEASED )**

**CONSENT OF BENEFICIARIES**

*[NOTE: If a beneficiary is not sui juris, indicate the relationship of the person who is authorized to consent for him/her in accordance with the instruction page to this form.]*

The undersigned, being a beneficiary under the Will of the above Decedent, being sui juris unless otherwise indicated, do hereby authorize the Judge of the Probate Court to:

\_\_\_\_\_\_\_\_ (a) *[****optional****; initial if applicable* ***TO GRANT POWERS****]* The Personal Representative is required by law to file a petition for leave to sell and obtain other approval by the court for various acts. By initialing here I agree that the Personal Representative should be awarded all of the powers contained in O.C.G.A. § 53-12-261; **OR**

\_\_\_\_\_\_\_\_ (b) *[****optional****; initial if applicable* ***TO WAIVE REPORTS****]* The Personal Representative is required by law to file reports (Inventory and Returns) and provide a copy to each interested party. By initialing here I agree that the Personal Representative should not be required to file any reports with the Court; **AND/OR**

\_\_\_\_\_\_\_\_ (c) *[****optional****; initial if applicable* ***TO WAIVE BOND****]* The Personal Representative is required by law to post a bond as the court deems necessary. By initialing here I agree that the Personal Representative should not be required to post a bond.

Sworn to and subscribed before me this

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

 Signature of Beneficiary

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

NOTARY/CLERK OF PROBATE COURT Printed Name of Beneficiary

My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

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

**DECEASED )**

**TESTAMENTARY CONSERVATOR’S**

**CONSENT TO SERVE**

*[To be completed only in the event a Testamentary Conservator is named in the Will]*

The undersigned, being 18 years of age or older, laboring under no legal disability, and being named as Testamentary Conservator, hereby consents to serve. I understand that once appointed, I will have the same rights, powers, and duties as set forth in O.C.G.A. § 29-3-5.

Sworn to and subscribed before me this

\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Testamentary Conservator

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

NOTARY/CLERK OF PROBATE COURT Printed Name of Testamentary Conservator

My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Sworn to and subscribed before me this

\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Testamentary Conservator

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

NOTARY/CLERK OF PROBATE COURT Printed Name of Testamentary Conservator

My Commission Expires \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

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

**DECEASED )**

**PETITION TO PROBATE WILL IN SOLEMN FORM AND FOR WAIVER OF BOND AND/OR GRANT OF CERTAIN POWERS**

**ORDER FOR NOTICE**

Since the beneficiaries have made a unanimous selection, and the Petition(s) has/have requested the waiver of bond and/or for the grant of certain powers contained in O.C.G.A. §53‑12‑261,

**IT IS ORDERED** that notice shall be published once each week for four weeks prior to the week which includes the date on or before which any objection must be filed.

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

**IN THE PROBATE COURT OF BIBB COUNTY**

 **STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

 **)**

 **NOTICE**

AN ORDER FOR SERVICE WAS GRANTED BY THIS COURT ON \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_, REQUIRING THE FOLLOWING:

The Petitioner(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has applied for waiver of bond and/or for the grant of certain powers contained in O.C.G.A. §53‑12‑261 in regard to the above estate.

 All interested parties are hereby notified to show cause 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 with the court on or before , 20 .

**BE NOTIFIED FURTHER:** 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, the Petition may be denied or a hearing will be (scheduled for a later date). If no objections are filed, the petition may be granted without a hearing.

|  |  |
| --- | --- |
| DATE:PUBLICATION DATES:FOUR INSERTIONSCHECK/MO NO. \_\_\_\_\_\_\_\_ ATTACHED FOR: **$85.00**ATTORNEY:**COURT REQUESTS AFFIDAVIT** | **Sarah S. Harris\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  PROBATE JUDGEBy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROBATE CLERK/DEPUTY CLERK Probate Court of Bibb CountyBibb County Courthouse, Room 207P.O. Box 6518Macon, GA 31208-6518(478) 621-6494 |

**PETITION TO PROBATE WILL IN SOLEMN FORM AND FOR WAIVER OF BOND AND/OR GRANT OF CERTAIN POWERS**

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

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

**DECEASED )**

**ORDER ADMITTING WILL (AND CODICIL(S)) TO PROBATE IN SOLEMN FORM AND FOR WAIVERS OF BOND AND GRANT OF CERTAIN POWERS**

 An alleged Last Will and Testament dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ was propounded.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ were/was nominated Personal Representative(s) by the Testator. The Court finds that the Decedent died domiciled within, or owning property within, the above county. The Court further finds that all of the heirs at law or beneficiaries under the Will acknowledged service and consent to the Petition. Notice was published and no objection has been filed, and all requirements of law have been fulfilled. The Court further finds that the propounded Will (is self-proving) (has been proved by one or more witnesses).

ACCORDINGLY, IT IS ORDERED that the Will dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and the Codicil(s) dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is established as the Last Will and Testament of the Decedent; that the Will (and Codicil(s)) be admitted to record as proven in solemn form; and, that the nominated Executor(s) named above has (have) leave to qualify as Personal Representative(s) by taking the required oath, after which Letters Testamentary shall issue. The Clerk shall serve the Personal Representative(s) with copies of Letters upon qualification.

 IT IS FURTHER ORDERED that the Personal Representative(s) shall disburse all property according to the terms of the Will (and Codicil(s)) and shall maintain all records of income and disbursements until discharged by Order of this Court.

**IT IS FURTHER ORDERED** that (initial if applicable)

\_\_\_\_\_\_ (a) ***POWERS GRANTED:*** Grants to the Personal Representative(s) all of the powers contained in O.C.G.A. § 53-12-261.

\_\_\_\_\_\_ (b) ***REPORTS WAIVED:*** Grants to the Personal Representative(s) the specific power to serve without making and filing inventory, and without filing any annual or other returns or reports to any court; but the fiduciary(ies) shall furnish to the heirs, at least annually, a statement of receipts and disbursements.

\_\_\_\_\_\_ (c) ***BOND WAIVED:*** Waives the specific requirement to post bond.

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

|  |  |
| --- | --- |
| FILED\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dep. Clerk |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sarah S. Harris Probate Judge  |

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

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

**DECEASED )**

**OATH OF EXECUTOR**

I do solemnly swear or affirm that this writing being presented to this Court dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_ is the true Last Will and Testament and the Codicil(s) dated

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, deceased so far as I know or believe, and that I will well and truly execute the same in accordance with the laws of Georgia. So help me God.

|  |  |
| --- | --- |
| Sworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ JUDGE/CLERK OF PROBATE COURTSworn to and subscribed beforeme this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ JUDGE/CLERK OF PROBATE COURT | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Executor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name of Executor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Executor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name of Executor |

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

 **)**

 **) DOCKET NO. \_\_\_\_\_\_\_\_\_\_\_**

**DECEASED )**

 **LETTERS TESTAMENTARY**

(With Waiver and Grant of Powers)

By **Sarah S. Harris** , Judge of the Probate Court of said County.

KNOW ALL WHOM IT MAY CONCERN:

At a regular term of Probate Court, the Last Will and Testament dated \_\_\_\_\_\_\_\_\_\_, and Codicil(s) dated \_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_, deceased, at the time of his or her death, a resident of the above County was legally proven in **SOLEMN** form and was admitted to record by order, and it was further ordered that \_\_\_\_\_\_\_\_\_\_\_\_, named as Executor(s) in said Will, be allowed to qualify, and that upon so doing, Letters Testamentary be issued to such Executor(s).

**NOW, THEREFORE**, the said \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, having taken the oath of office and complied with all the necessary prerequisites of the law, is/are legally authorized to discharge all the duties and exercise all the powers of Executor(s) under the Will of said deceased, according to the Will and the law.

In addition, this Court has:

(Initial all which apply:)

\_\_\_\_\_\_ (a) ***POWERS GRANTED:*** Grants to the Administrator(s) all of the powers contained in O.C.G.A. § 53-12-261.

\_\_\_\_\_\_ (b) ***REPORTS WAIVED:*** Grants to the Administrator(s) the specific power to serve without making and filing inventory, and without filing any annual or other returns or reports to any court; but the fiduciary(ies) shall furnish to the heirs, at least annually, a statement of receipts and disbursements.

\_\_\_\_\_\_ (c) ***BOND WAIVED:*** Waives the specific requirement to post bond.

**IN TESTIMONY WHEREOF,** I have hereunto affixed my signature as Judge of the Probate Court of said County and the seal of this office this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

 **Sarah S. Harris**

 Judge, Probate Court

NOTE: The following must be signed if the judge

does not sign the original of this document:

Issued by: (Seal)

PROBATE CLERK/DEPUTY CLERK