**PETITION TO PROBATE WILL IN COMMON FORM**

INSTRUCTIONS

1. Specific Instructions
   1. This form is to be used when filing a Petition to Probate Will in Common Form pursuant to O.C.G.A. § 53-5-15 et seq.
   2. An Order for Probate of a Will in Common Form may be granted without service to any one, unless required by the Court. The Court may refuse to grant a Petition to Probate a Will in Common Form. (Henderson v. McVay, 269 Ga. 7 (1998).)
   3. According to O.C.G.A. § 53-5-19, a Probate in Common Form is not conclusive on all parties until four years from the time of probate (or if minors, four years after said minor reaches the age of majority).
   4. As set out in O.C.G.A. § 53-5-16 (b) “... probate of a will in common form does not protect the executor in any acts beyond the executor’s normal duties of collecting and preserving assets …”
   5. This form should not be used in connection with a Petition to probate a copy of a will in lieu of a lost original without checking with the Court in which the Petition will be filed.
   6. This form should not be used to file a combination Petition to Probate Will and for Letters of Administration with Will Annexed [see Petition to Probate Will in Solemn Form and for Letters of Administration with Will Annexed, GPCSF 7].
   7. O. C.G.A. § 53-11-2 provides that a party to a probate proceeding who is not sui juris must be represented by a guardian, provided that the Court may appoint a guardian ad litem or determine that the natural guardian, guardian, conservator, or testamentary guardian has no conflict and may serve. Should a guardian ad litem be necessary because a party is not sui juris, use Supplement 1.
   8. 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 the same or closer degree who have not been listed. Provide the date of death of any deceased heirs and the name of the deceased heir’s 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.gov.] 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.”
   9. Paragraph 6. In the event there is a Testamentary Guardian named in the Will and the Decedent died leaving minor children, then the Consent to Serve should be completed according to O.C.G.A. § 29-2-4 and/or § 29-3-5. When a Testamentary Guardian is to be appointed, Supplement 5 (Testamentary Guardianship) should be included with this Petition and the Petitioner(s) must provide full names and addresses for the minor children’s adult siblings and grandparents. If there are no living adult siblings or grandparents, the Petitioner(s) must provide full names and addresses for the minor children’s great-grandparents, aunts, uncles, great-aunts, or great-uncles, if any such relatives exist. If the minor children shared the same parents, the Petitioner(s) may complete one Supplement 5 for such similarly situated children. If the minor children did not share the same parents, a separate Supplement 5 must be filed for each minor. Contact the Probate Court in which the Petition will be filed for its policy as to the filing of Supplement 5 when there are multiple children. Use Supplement 2 if the Court determines it is appropriate to appoint a special process server.
   10. Use Supplement 3 when an additional certificate of service is necessary.
   11. Exhibits should be labeled at the bottom of each exhibit as Exhibit “A,” Exhibit “B,” etc. in consecutive order. The corresponding letter of each said exhibit should be inserted into the appropriate place in the form.
   12. An oath must be administered by a Probate Judge or Clerk (the oath cannot be administered by a notary public). Use Georgia Probate Court Supplement 4 for the oath. The oath is not included in this form. Georgia Probate Court Standard Form 53, Commission to Administer Oath, can be used if the oath is to be administered by a court outside the State of Georgia.
   13. According to Uniform 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. All pages after the Notice regarding Uniform Probate Court Rule 5.6 (A) are to be completed by the moving party, unless otherwise directed by the Court.
2. General Instructions

General instructions applicable to all Georgia Probate Court Standard Forms are available in each probate court or at www.gaprobate.gov, labeled GPCSF 1.

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

**PETITION TO PROBATE WILL IN COMMON FORM**

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

*[Full name(s) of Petitioner(s)] First Middle Last*

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 the Court the following:

1.

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

*[Full name of Decedent] First Middle Last*

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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (along with Codicil(s) dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_), which is herewith offered for probate in Common Form as the Decedent’s “Will”. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is/are named as Executor(s).

3.

Listed below are all of Decedent’s heirs, the age or majority status, address, and relationship to the Decedent set opposite the name of each:

*Name Age (or over 18) Address Relationship*

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

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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 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 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. 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.]*

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

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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 or any other state.

**\_\_\_\_\_\_\_\_** (b) The probate of another purported Will of the Decedent is pending in the State of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** in the **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** County **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Court. The name(s) 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, as Exhibit “**\_\_\_\_**,” 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 and address of each Petitioner, and the name and address of any appointed Administrator is 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

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

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**\_\_\_\_\_\_\_\_** (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

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

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Additional Data: *[Where full particulars are lacking, state here the reason for any such omission.]*

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WHEREFORE, Petitioner(s) pray(s):

1. Leave to prove said Will (and Codicil(s)) in Common Form;
2. That due and legal notice be given as required by the Court;
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 Petitioner

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

Printed Name

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

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

Mailing Address

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

Telephone Number

Signature of Attorney \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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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 to Probate Will in Common Form and the attached Exhibit(s) are true and correct.

Sworn to and subscribed before me this

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

Signature of Petitioner

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

NOTARY/CLERK OF PROBATE COURT Printed Name of Petitioner

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

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

**TESTAMENTARY CONSERVATOR**

**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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***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 OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

**ORDER ADMITTING WILL (AND CODICIL(S)) TO PROBATE IN COMMON FORM**

An alleged Last Will and Testament dated **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (and Codicil(s) dated **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**) was/were propounded.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** was/were nominated Personal Representative(s) by the Testator. The Court finds that the Decedent died domiciled within, or domiciled outside the State of Georgia but owning property within, the above County. The Court further finds that 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/are established as the Last Will and Testament of the Decedent (“the Decedent’s Will”); that the Will be admitted to record as proven in Common 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 this Order and the Letters upon qualification.

IT IS FURTHER ORDERED that the Personal Representative(s) shall disburse all property according to the terms of the Decedent’s Will 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) An inventory shall be filed.

**\_\_\_\_\_\_** (b) Annual returns shall be filed.

**\_\_\_\_\_\_** (c) Letters of Testamentary Conservatorship shall issue to

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

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

Sarah S. Harris Probate Judge

FILED

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

Date

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

Clerk

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

**CERTIFICATE OF SERVICE**

I certify that I have this date mailed (unless otherwise noted) in an envelope with the proper postage affixed thereto for first-class mail delivery copies of the

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the following parties at the addresses below:

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

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

**Deputy Clerk**

**Bibb County Probate Court**

**P.O. Box 6518**

**Macon, GA 31208**

**478-621-6494**

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

**LETTERS TESTAMENTARY**

*[Relieved of Filing Returns]*

At a regular term of the Probate Court, the Last Will and Testament dated **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (and Codicil(s) dated **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**), of the above-named Decedent, who was domiciled in this County at the time of his or her death or who was domiciled in another state but owned property in this County at the time of his or her death, was legally proven in Common Form to be the Decedent’s Will 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).

THEREFORE, the Executor(s), 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 Decedent, according to the Decedent’s Will and the law.

Given under my hand and official seal, the **\_\_\_\_** day of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** 20**\_\_\_\_.**

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

Sarah S. Harris Probate Judge

*NOTE: The following must be signed if the  
 Judge does not sign the original of  
 this document:*

Issued by: *[Seal]*

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

Clerk of the Probate Court

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

**LETTERS TESTAMENTARY**

*[Not Relieved of Filing Returns]*

At a regular term of the Probate Court, the Last Will and Testament dated **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (and Codicil(s) dated **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**), of the above-named Decedent, who was domiciled in this County at the time of his or her death or who was domiciled in another state but owned property in this County at the time of his or her death, was legally proven in Common Form to be the Decedent’s Will 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).

THEREFORE, the Executor(s), 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 Decedent, according to the Decedent’s Will and the law and is/are hereby required to render a true and correct inventory of all property, both real and personal, and any and all debts of the estate, and make a return of them to this Court, and further, to file a proper annual return or final return with this Court each year within sixty (60) days of the anniversary date of the appointment until the Executorship is fully discharged.

Given under my hand and official seal, the **\_\_\_\_** day of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** 20**\_\_\_\_.**

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

Sarah S. Harris Probate Judge

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Issued by: *[Seal]*

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

Clerk of the Probate Court

**IN THE PROBATE COURT OF BIBB COUNTY**

**STATE OF GEORGIA**

**IN RE: ESTATE OF )**

**)**

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

**DECEASED )**

**LETTERS OF TESTAMENTARY CONSERVATORSHIP OF MINOR**

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

TO: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** Testamentary Conservator(s)

RE: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** Minor

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** Date of Birth

Pursuant to the Last Will and Testament (and Codicil(s)), of the above-named Decedent, you have been appointed Testamentary Conservator(s) of the Minor’s property. You have assented to this appointment by taking your oath. In general, your duties as Testamentary Conservator(s) are to protect and maintain the property of the Minor and utilize the Minor’s property solely for the benefit of the Minor. Consult your attorney if you have any questions.

**These Letters of Testamentary Conservatorship empower the above Testamentary Conservator(s) to hold, for the Minor, only property which passed through the estate of the above-named Decedent.**

Given under my hand and official seal, the **\_\_\_\_** day of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** 20**\_\_\_\_.**

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

Sarah S. Harris Probate Judge

*NOTE: The following must be signed if the  
 Judge does not sign the original of  
 this document:*

Issued by: *[Seal]*

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

Clerk of the Probate Court