UNSUPERVISED PROBATE PACKET INFORMAL

COURT STAFF IS PROHIBITED BY LAW FROM GIVING LEGAL ADVICE, IF YOU HAVE ANY LEGAL QUESTIONS DURING THIS PROCESS PLEASE CONTACT AN ATTORNEY.

Forms must be filled out completely and uploaded to MiFILE (mifile.courts.michigan.gov/login). Keep copies for your own record.

Step One: Initial Filing-*Payment of $175 is due at the time of filing online*

Documents Included:

- Information/Instructions of filing for informal probate
- Application for Informal Probate (PC 558) along with a copy of a death certificate and copy of will and codicil(s) if one exists.

  *__you must file the original Will with the Court if one exists and Codicil(s) within 14 days__. If not received within 14 days the Court will dismiss your Petition. You can deliver the Will and or Codicil(s) in person or by mail. The Court is not responsible if the Will and or Codicil(s) gets lost in transit. MCR 5.302(A)(2)
- Protected Personal Identifying Information (MC 97) – Enter personal identifying information on this form.
- Testimony to Identify Heirs (PC 565)
- Supplemental Testimony (PC 566)
- Renunciation of Rights to Appointment (PC 567)
- Notice of Intent to Request Informal Appointment of Personal Representative (PC 557)

Step Two: Once you have received confirmation from MiFILE that the Court has accepted your application please complete the following forms.

Documents Included:

- Register's Statement (PC 568)
- Acceptance of Appointment (PC 571)
- Addendum To Protected Personal Identifying Information (MC 97a) – Enter personal identifying information on this form.
- Letters of Authority for Personal Representative (PC 572)

*If required, you must also file any renunciation of appointment or notice of intent before the Register will issue Letters of Authority, please see instruction sheet for further information.

Forms Needed for Future Filings:

Documents Included:

- Notice of Appointment (PC 573)
- Notice to Creditors (PC 574)
- Notice to Known Creditors (PC 578)

OTTAWA COUNTY PROBATE COURT
414 WASHINGTON ST, ROOM 200
GRAND HAVEN, MI 49417

Hours: Mon-Fri 8:00 AM-5:00 PM
Phone: 616-786-4110
Website: www.miottawa.org

- Inventory (PC 577)
- Proof of Service (PC 564)
- Sworn Statement to Close (PC 591)
- Certificate of Completion (PC 592) – The court will send you this form when file has been closed.
- Notice of Continued Administration (PC 587) - this form will be required annually if the estate is not settled.

OTTAWA COUNTY PROBATE COURT
414 WASHINGTON STREET, ROOM 200
GRAND HAVEN, MI 49460

Hours: Mon-Fri 8:00 AM-5:00 PM
Phone: 616-786-4110
Website: www.miottawa.org

Informal Proceedings

From Beginning to Register's Statement

Informal Proceedings

Informal proceedings are commenced by filing an application directed to the register. The application may be for informal probate (informal admission of a will) or appointment of a personal representative or both. Informal proceedings are defined in EPIC to mean proceedings for probate of a will or appointment of a personal representative conducted by the probate register without notice to interested persons. This material will deal only with informal proceedings. **If you are attempting to admit a copy (or anything other than an original) of a will you must file a petition not an application, see formal proceedings instructions.**

Only an "interested person" may file an application for informal probate or appointment or both. Interested person is defined very broadly by MCL 700.1105(a):

"interested person" includes, but is not limited to, an heir, devisee, child, spouse, creditor, and beneficiary and any other person that has a property right in or claim against a trust estate or the estate of a decedent, ward, or protected individual; a person that has priority for appointment as personal representative; and a fiduciary representing an interested person.

There are two important terms that should be briefly defined now. Devisee is a person designated to receive property in a will. Heir is a person who is entitled under the statute of intestate succession to a decedent's property.

The forms and documents which must be filed with or presented to the register to commence an informal proceeding are:

- Application for Informal Probate and/or Appointment of Personal Representative (Testate/Intestate) (PC 558) and payment of $175.00. The application should be completely and carefully filled out.
- Copy of death certificate.
- ORIGINAL Will and codicil, if any.
- Testimony of Interested Persons (PC 565).
- Supplemental Testimony Interested Persons Testate Estate (PC 566). This form is only filed if decedent left a will and some of the devisees named in the will and codicils are not heirs of the testator.
- Register's Statement (PC 568).
- Acceptance of Appointment (PC 571). A bond is not required unless the will requires a bond or bond is demanded under MCL 700.3605 (by person having an interest in the estate worth in excess of $2,500 or a creditor having a claim against the estate in excess of $2,500).
- Letters of Authority for Personal Representative (PC 572).

Persons who are not disqualified have priority for appointment in the following order pursuant to MCL 700.3203(1):

- The person with priority as determined by a probated will include a person nominated by a power conferred in a will.
- The surviving spouse if the spouse is a devisee under the will.
- Other devisees.
- The surviving spouse.
- Other heirs.
- After 42 days after the decedent's death, the nominee of a creditor if the court determines the nominee suitable.
- State or county public administrator.
- A person with priority under 2 through 5 above may nominate a qualified person to serve as personal representative and that nominee has the priority of the nominator pursuant to MCL 700.3203(3).

Under MCL 700.3310 an applicant seeking appointment in an informal proceeding must give notice to each person having a prior or equal right to appointment who has not waived the right. Such a waiver may be accomplished by filing a Waiver and Consent (PC 561). The applicant must also serve a copy of the application on those persons pursuant to MCR 5.709(C). The notice and service of the application must be made at least 14 days by mail or publication or 7 days by personal service prior to appointment. A proof of service must also be filed with the court pursuant to MCR 5.709(C)(2).

In an informal proceeding for original probate of a will, MCL 700.3303(1) requires that the register shall determine whether all of the following are true:

- The application is complete.
- The applicant has made oath or affirmation that the statements contained in the application are true to the best of the applicant's knowledge and belief.
- The applicant appears from the application to be an interested person.
- On the basis of the statements in the application, venue is proper.
- An original, properly executed, and apparently unrevoked will is in the register's possession.
- That the application is not within section 3304. This section provides that the register shall deny an application for informal probate if the probate relates to 1 or more of a known series of testamentary instruments, not including a will and 1 or more codicils to that will, the latest of which instrument does not expressly revoke the earlier.

In informal appointment proceedings, MCL 700.3308(1) requires that the register shall determine whether all of the following are true:

- The application for the personal representative's informal appointment is complete.
- The applicant has made oath or affirmation that the statements contained in the application are true to the best of the applicant's knowledge and belief.
- The applicant appears from the application to be an interested person.
- On the basis of the statements in the application, venue is proper.
- A will to which the requested appointment relates has been formally or informally probated. This subdivision does not apply to the appointment of a special personal representative.

- The person whose appointment is sought has priority to the appointment or the requirements of section 3310 (explained previously) have been satisfied.

If all papers are in order and the register is able to make the required findings, the register will sign the Register's Statement and immediately issue Letters of Authority. If the register denies the application, the register shall state the reason for the denial. The denial is not adjudication. There is no appeal from this denial. Essentially, a denial will require that you begin probate by formal proceedings.

JIS Code: IPA

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	APPLICATION FOR INFORMAL PROBATE AND/OR APPOINTMENT OF PERSONAL REPRESENTATIVE (TESTATE/INTESTATE)	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

In the matter of _____
First, middle, and last name

Petitioner's name, address and telephone no.	Petitioner's attorney, bar no., address, and telephone no.

1. I, _____ , am interested in the estate and make this application as
Name of applicant

_____ .
Relationship to decedent, i.e., heir, devisee, child, spouse, creditor, beneficiary, etc.

2. Decedent information: _____ _____ Put DOB in Ref. No. row 1 on MC 97. **XXX-XX-** Put last 4 digits of SSN in Ref. No. row 2 on MC 97.
Date of death | Time (if known) | Date of birth | Last four digits of SSN

Domicile (at date of death): _____ _____ _____
City/Township/Village | County | State

3. ☐ A death certificate has been issued, and a copy accompanies this application as a separate document.
☐ No death certificate is available. Attached is alternative documentation of the decedent's death.

4. As far as I know or could ascertain with reasonable diligence, the names and addresses of the spouse, children, devisees, and heirs of the decedent, and other interested persons, the relationship to the decedent, and the ages of any who are minors are:

(Required testimony forms are attached.)

NAME	ADDRESS			RELATIONSHIP*	AGE (if minor)**
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		

*Specify spouse, child, devisee, or heir.
**If person is a minor, provide the date of birth on form MC 97a and put the Ref. No. from that form in the box above with the age.

4. (continued)
Of the interested persons listed above, the following are under legal disability or otherwise represented and presently have or will require representation:

NAME	LEGAL DISABILITY	REPRESENTED BY Name, address, and capacity

5. ☐ a. Venue is proper in this county because the decedent was domiciled in this county on the date of death.
☐ b. The decedent was not domiciled in Michigan, but venue is proper in this county because property of the decedent was located in this county at the date of death.

6. ☐ a. The decedent died intestate and after exercising reasonable diligence, I am unaware of any unrevoked testamentary instrument relating to property located in this state as defined under MCL 700.1301.
☐ b. I am aware of an unrevoked testamentary instrument relating to property located in this state as defined under MCL700.1301, but the instrument is not being probated because (if this statement is true, the probate register must deny this application according to MCL 700.3311): _____
The instrument ☐ is attached to this application. ☐ is already in the court's possession.

☐ c. The decedent's will, dated _____ , with codicil(s) dated _____ , is/are offered for probate and ☐ is/are attached to this application. ☐ is/are already in the court's possession.

☐ d. An authenticated copy of the will and codicil(s), if any, probated in _____ County, _____ (State) is/are offered for probate, and documents establishing its probate are attached to this application.

7. To the best of my knowledge, I believe that the instrument(s) subject to this application, if any, was/were validly executed and is the decedent's last will. After exercising reasonable diligence, I am unaware of an instrument revoking the will or codicil(s).

☐ 8. A personal representative has been previously appointed in _____ County, _____ (State) and the appointment has not been terminated. The personal representative's name and address are:

_____ (Name) _____ (Address)

_____ (City) _____ (State) _____ (Zip)

☐ 9. I nominate _____ (Name) as personal representative, who is qualified and has the following priority for appointment: _____ . His/her address is: _____ (Address)

_____ (City) _____ (State) _____ (Zip) .

☐ 10. Other persons have prior or equal right to appointment as personal representative. They are:

_____ (Name) _____ (Name)

_____ (Name) _____ (Name)

Suitable renunciations, nominations, and/or a Notice of Intent to Seek Informal Appointment and proof of its service have been or will be filed.

☐ 11. The will expressly requests that the personal representative serve with bond.

☐ 12. A special personal representative is necessary because _____

_____ .

I REQUEST:

☐ 13. Informal probate of the will.

☐ 14. Informal appointment of the nominated personal representative ☐ with ☐ without bond.

☐ 15. The appointment of a special personal representative pending the appointment of the nominated personal representative.

I declare under the penalties of perjury that this application has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

_____ _____
Date Applicant signature

_____ _____
Date Attorney signature

JIS Code: PPI

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT OTTAWA COUNTY	PROTECTED PERSONAL IDENTIFYING INFORMATION	CASE NO. and JUDGE

Court address

414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.

616-786-4110

Plaintiff's/Petitioner's name	v	Defendant's/Respondent's name

In the matter of _____

This form is nonpublic because it contains personal identifying information (PII) that is protected from public inspection under MCR 1.109(D)(9)(a). Use this form to provide PII only for a person who is a defendant, respondent, or decedent. If the person is a plaintiff, petitioner, or other individual, use form MC 97a.

Instructions:

- When PII (such as date of birth) must be filed with the court on a public document, DO NOT include it on that public document. Instead, you must provide it on this form.
- **Provide only** the protected PII required for your particular case. For example, if you are filing a public document that requires you to provide a date of birth to the court, complete only that field on this form.

Name of form/document that this MC 97 is being filed with: _____

_____

Printed name of individual completing form and date

Instructions: Provide the name of the person that the PII applies to, followed by the specific PII that is required to be provided. For Other, specify the type of PII in addition to the PII itself. Use the below reference number (Ref. No.) in the public document in place of the protected PII. For example, insert "Ref. No. 1" in place of the DOB in the public document.

Ref. No.	Name (required)
1	Date of birth
2	National ID no. / Last 4 digits of SSN XXX-XX-_____
3	Driver's License / State-issued ID no.
4	Passport no.
5	Other

Ref. No.	**Instructions:** List the name of the financial institution and the account number. List the paragraph that references the account, if needed for clarity. Use reference number (Ref. No.) when necessary to refer to account in public documents.		
6	Financial institution	Account no.	Paragraph no.
7	Financial institution	Account no.	Paragraph no.
8	Financial institution	Account no.	Paragraph no.
9	Financial institution	Account no.	Paragraph no.

PCS Code: TES
TCS Code: TEST

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	TESTIMONY TO IDENTIFY HEIRS	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

In the matter of _____
First, middle, and last name of decedent

1. My name is _____ . My address is _____

_____ .

2. I am related to the decedent (or know his/her family) as follows: _____

3. The date and time of the death of the decedent is _____ and at that time the
Date Time

decedent's domicile (residence) was _____ .
Address

NOTE: IN THE FOLLOWING QUESTIONS, TREAT ALL PERSONS WHO DIED WITHIN 120 HOURS AFTER THE DECEDENT AS IF THEY DID NOT SURVIVE THE DECEDENT. List persons who died within 120 hours after the decedent in item 14 below.

4. The decedent ☐ did not leave a surviving spouse.
☐ left a surviving spouse named _____ .

5. ☐ a. The decedent had the following children, both natural (born in or out of wedlock) and adopted:

_____

☐ b. Of the children listed in 5a, the following are no longer heirs due to their adoption by someone other than a stepparent: _____

☐ c. Of the children listed in 5a, the following were not children of the surviving spouse: _____

_____

Answer question 6 only if question 5a was checked.

6. ☐ a. The following children listed in 5a died before the decedent: _____

_____

☐ b. Children listed in 6a left their own children (either natural or adopted) or left grandchildren from one or more of their own predeceased children who survived the decedent. The names of these descendants and the name of the child in 6a to whom they are related are as follows:

_____

_____

☐ c. Of the persons listed in 6b, the following are no longer heirs due to their adoption by someone other than a stepparent: _____

Case No. _____

If decedent left no surviving descendant, complete 7.

7. The decedent ☐ did not leave a surviving parent. ☐ left a surviving parent named

_____ .

If decedent is not survived by spouse, descendants, or parents, complete 8 (and 9, if applicable).

8. The decedent ☐ did not leave surviving brothers or sisters. ☐ left the following brothers or sisters, either natural or adopted, whole blood or half blood, who were not adopted by others and who survived the decedent:

_____

_____

☐ 9. One or more of the brothers and sisters of the decedent died before him/her leaving descendants, either natural or adopted, who were not adopted by others and who survived the decedent. The names of these descendants, and the name(s) of their deceased ancestor are

_____

_____ .

If decedent was not survived by spouse, descendants, parent, brother, or sister or children of deceased brother or sister, complete10 (and 11, if applicable).

10. The decedent ☐ did not leave surviving grandparents. ☐ left surviving grandparents (both maternal and paternal) named _____ .

☐ 11. Both maternal grandparents and/or both paternal grandparents died before decedent. Their surviving descendants and their relationships to the grandparents are

Maternal grandparents: _____ .

Paternal grandparents: _____ .

☐ 12. The following heirs listed above are under legal disability and are currently living. Their name(s), legal disability, and name(s) of their representative(s) are _____

_____ .

☐ 13. The following deceased heirs survived the decedent by more than 120 hours. Their name(s) and the name(s) of those who represent decedent's interests are _____

_____

_____ .

☐ 14. The following persons identified above did not survive the decedent by 120 hours. Their names, relationships to decedent, and the date and time of their deaths are:

NAME	RELATION	DATE OF DEATH	TIME OF DEATH

Case No. _____

☐ 15. The decedent left a will.

☐ All devisees are heirs.
☐ Some of the devisees named in the will or codicil are not heirs of the testator.
(A supplemental testimony form is completed and attached.)

I declare under the penalties of perjury that this testimony has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

_____
Date

_____
Signature

_____
Attorney signature

_____
Name (type or print) Bar no.

_____
Address

_____
City, state, zip Telephone no.

JIS Code: TSS

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	SUPPLEMENTAL TESTIMONY TO IDENTIFY NONHEIR DEVISEES Testate Estate	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

In the matter of _____
First, middle, and last name of decedent

*****USE THIS FORM ONLY IF A DEVISEE NAMED IN THE WILL OR CODICIL IS NOT AN HEIR OF THE TESTATOR*****

NOTE: TREAT ALL PERSONS WHO DIED WITHIN 120 HOURS AFTER THE DECEDENT AS IF THEY DID NOT SURVIVE THE DECEDENT. List persons who died within 120 hours after the decedent in item 18 below.

16. The names of all devisees named in the will and codicils who are not heirs of the decedent (include testamentary trustees and beneficiaries of testamentary trusts) are _____

_____

_____ .

☐ 17. Of the devisees listed in 16, the following died before the decedent. Their names and relationships to the decedent are _____

_____ .

☐ 18. The following devisees died within 120 hours after the decedent. Their names, relationships to decedent, and the date and time of their deaths are:

NAME	RELATIONSHIP	DATE OF DEATH	TIME OF DEATH

☐ 19. The following are descendants of the predeceased devisees named above, who survived the decedent:

_____

_____ .

☐ 20. Class gifts in the will or codicils, where the members are not specifically identified by name, are as follows:

_____

_____

_____ .

☐ 21. The following devisees named above are under legal disability. Their names, legal disabilities, and names of their representative(s) are

_____

_____ .

☐ 22. The following deceased devisees survived the decedent by more than 120 hours. Their names and the names of those who represent their interests are

_____

_____ .

☐ 23. The guardian ad litem for each devisee under the will and codicils who is unborn, unknown, or unascertainable is

_____ .

I declare under the penalties of perjury that this supplemental testimony has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

_____ _____
Date Signature

_____
Attorney signature

_____
Name (type or print) Bar no.

_____
Address

_____
City, state, zip Telephone no.

Approved, SCAO JIS CODE: RRA

STATE OF MICHIGAN PROBATE COURT COUNTY OF OTTAWA	RENUNCIATION OF RIGHT TO APPOINTMENT, NOMINATION OF PERSONAL REPRESENTATIVE AND WAIVER OF NOTICE	FILE NO.

Estate of _____

1. I, _____ , have a prior or equal right to appointment as personal representative.
   Name (type or print)
2. ☐ I renounce that right.
3. ☐ I have the right to nominate and I nominate and request the appointment of _____ as personal representative.
   Name (type or print)

   ☐ I renounce my right to nominate a qualified person to act as personal representative.
4. ☐ I waive notice of the appointment.

_____
Date

_____ _____
Attorney name (type or print) Bar no. Signature

_____ _____
Address Address

_____ _____
City, state, zip Telephone no. City, state, zip Telephone no.

NOTE: A person with priority as determined by a probated will, including a person nominated by a power conferred in the will, does not through this priority have the power to nominate another to be personal representative.

Do not write below this line - For court use only

Approved, SCAO

JIS CODE: NRI

STATE OF MICHIGAN PROBATE COURT COUNTY OF OTTAWA	NOTICE OF INTENT TO REQUEST INFORMAL APPOINTMENT OF PERSONAL REPRESENTATIVE	FILE NO.

Estate of _____

I, _____ (Name), intend to request my informal appointment as personal representative of the estate. A copy of the application is attached. This notice is being served upon each person whose right to an appointment is prior or equal to my own. The court will not act upon my application until 14 days after the date this notice was mailed or until 7 days after this notice was personally served.

The actions you may take include:

- Upon paying a filing fee, filing a petition for formal proceedings to appoint a personal representative.
- Upon paying a filing fee, filing an application for informal appointment of yourself as personal representative provided you have a higher priority to be appointed.
- Contacting an attorney for assistance in representing you in any proceeding you wish to file in the court.

The court will not be able to provide you with any legal advice in completing or filing the forms.

Date

Attorney name _____ Bar no. _____

Address _____

City, state, zip _____ Telephone no. _____

Applicant signature _____

Address _____

City, state, zip _____ Telephone no. _____

NOTICE TO APPLICANT: You must attach this notice and a proof of service to the application for informal appointment when you file it with the court. If you are unable to serve an interested person because the address or whereabouts of that interested person is unknown, you must publish notice by using form PC 563a.

Do not write below this line - For court use only

MCL 700.3310, MCR 5.309(C)

JIS Code: RIO

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	REGISTER'S STATEMENT	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

In the matter of _____
First, middle, and last name of decedent

1. An application has been filed requesting
   - ☐ informal probate of the will of the above named decedent.
   - ☐ the appointment of a personal representative.
   - ☐ the previously administered estate be reopened.
   - ☐ appointment of a successor personal representative.
2. Upon consideration of the application, I determine that all of the following are true:
   - a. Venue is proper.
   - b. The application is complete and made in accordance with MCL 700.3301 or MCR 5.312.
   - c. The applicant appears to be an interested person.
   - ☐ d. An original, properly executed, and apparently unrevoked will dated _____ with codicil(s) dated _____ is in my possession.
     - ☐ An authenticated copy of the will and codicil(s) probated in _____ County _____ is offered for informal proceedings and documents establishing probate in another state are in my possession.
   - e. The application is not within MCL 700.3304 or MCR 5.144.
   - ☐ f. A will to which the requested appointment relates has been formally or informally probated.
   - ☐ g. ☐ The person whose appointment is sought has priority to the appointment, with or without appropriate nomination and/or renunciation.
     - ☐ The applicant gave notice of his/her intention to seek an informal appointment to each person having a prior or equal right to an appointment not waived in writing and filed with the court.
   - ☐ h. There is a good cause to reopen the previously administered estate and appoint a personal representative. The estate was not closed under supervised administration.
3. ☐ The will dated _____ with codicils dated _____ is admitted to informal probate.
4. ☐ The authority of the prior personal representative has been terminated by death, resignation, or appointment of a conservator.
5. ☐ _____ is appointed
   ☐ personal representative ☐ special personal representative ☐ successor personal representative
   of the decedent's estate and upon filing a statement of acceptance, letters shall issue to that personal representative
   ☐ without bond. ☐ upon filing a bond in the the amount of $ _____ .
   After qualification, the personal representative shall comply with all relevant requirements under the law.
6. ☐ The application is denied because:
   - ☐ a personal representative has been appointed in this or another county of this state and continues to serve.
   - ☐ this or another will of the decedent has been the subject of a previous probate order.
   - ☐ the probate relates to one or more of a known series of testamentary instruments, the latest of which does not expressly revoke the earlier.
   - ☐ other: _____
7. ☐ The estate is reopened. ☐ Letters of authority expire _____ .

_____
Register signature and date

_____
Attorney name (type or print) Bar no.

_____
Address

_____
City, state, zip Telephone no.

PCS Code: AOT
TCS Code: AOA

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	ACCEPTANCE OF APPOINTMENT	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

In the matter of _____
First, middle, and last name

1. I have been appointed _____ of the person/estate.
   Type of fiduciary
2. I accept the appointment, submit to personal jurisdiction of the court, and agree to file reports and to perform all required duties.

☐ 3. For a period of _____ days from the date of my appointment, I exclude from the scope of my responsibility
not to exceed 91 days

the following real estate or ownership interest in a business entity: _____
Describe real property or business interest

because I reasonably believe the real estate or other property owned by the business entity is or may be contaminated by a hazardous substance, or is or has been used in an activity directly or indirectly involving a hazardous substance that could result in liability to the estate or otherwise impair the value of property held by the estate.

_____
Date

_____
Signature

_____ _____
Attorney name (type or print) Bar no.

_____
Attorney Address

_____ _____
City, state, zip Telephone no.

_____
Name (type or print)

_____
Address

_____ _____
City, state, zip Telephone no.

Put DOB in row 10 on MC 97a.
Date of birth

JIS Code: API

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT OTTAWA COUNTY	ADDENDUM TO PROTECTED PERSONAL IDENTIFYING INFORMATION	CASE NO. and JUDGE

Court address

414 WASHINGTON AVE, ROOM 200, GRAND HAVEN MI 49417

Court telephone no.

616-786-4110

Plaintiff's/Petitioner's name	v	Defendant's/Respondent's name

In the matter of _____

This form is nonpublic because it contains personal identifying information (PII) that is protected from public inspection under MCR 1.109(D)(9)(a). Use this form to provide PII only for a person who is a NOT a defendant, respondent, or decedent. If the person is a defendant, respondent, or decedent use form MC 97.

Instructions:

- When PII (such as date of birth) must be filed with the court on a public document, DO NOT include it on that public document. Instead, you must provide it on this form.
- **Provide only** the protected PII required for your particular case. For example, if you are filing a public document that requires you to provide a date of birth to the court, complete only that field on this form.

Name of form/document that this MC 97a is being filed with: _____

_____

Printed name of individual completing form and date

Ref. No.	**Instructions:** Provide the name of the person that the PII applies to, followed by the specific PII that is required. For Other, specify the type of PII in addition to the PII itself - for example, Social Security No. XXXX. Use the below reference number (Ref. No.) in the public document in place of the protected PII. For example, insert "Ref. No. XX" in place of the DOB in the public document.		
10	Name	DOB	Other
11	Name	DOB	Other
12	Name	DOB	Other
13	Name	DOB	Other
14	Name	DOB	Other
15	Name	DOB	Other
16	Name	DOB	Other
17	Name	DOB	Other
18	Name	DOB	Other

Approved, SCAO

JIS CODE: LET

STATE OF MICHIGAN PROBATE COURT COUNTY OF OTTAWA	LETTERS OF AUTHORITY FOR PERSONAL REPRESENTATIVE	FILE NO.

Estate of _____

TO: Name and address

Telephone no.

You have been appointed and qualified as personal representative of the estate on _____ (Date). You are authorized to perform all acts authorized by law unless exceptions are specified below.

☐ Your authority is limited in the following way:

- ☐ You have no authority over the estate's real estate or ownership interests in a business entity that you identified on your acceptance of appointment.
- ☐ Other restrictions or limitations are:

☐ These letters expire: _____ (Date).

Date

Judge (formal proceedings)/Register (informal proceedings) Bar no.

SEE NOTICE OF DUTIES ON SECOND PAGE

Attorney name (type or print) Bar no.

Address

City, state, zip Telephone no.

I certify that I have compared this copy with the original on file and that it is a correct copy of the original, and on this date, these letters are in full force and effect.

Date

Deputy register

Do not write below this line - For court use only

MCL 700.3103, MCL 700.3307, MCL 700.3414, MCL 700.3504, MCL 700.3601, MCR 5.202, MCR 5.206, MCR 5.307, MCR 5.310

The following provisions are mandatory reporting duties specified in Michigan law and Michigan court rules and are not the only duties required of you. See MCL 700.3701 through MCL 700.3722 for other duties. Your failure to comply may result in the court suspending your powers and appointing a special fiduciary in your place. It may also result in your removal as fiduciary.

CONTINUED ADMINISTRATION: If the estate is not settled within 1 year after the first personal representative's appointment, you must file with the court and send to each interested person a notice that the estate remains under administration, specifying the reasons for the continued administration. You must give this notice within 28 days of the first anniversary of the first personal representative's appointment and all subsequent anniversaries during which the administration remains uncompleted. If such a notice is not received, an interested person may petition the court for a hearing on the necessity for continued administration or for closure of the estate. [MCL 700.3703(4), MCL 700.3951(3), MCR 5.144, MCR 5.307, MCR 5.310]

DUTY TO COMPLETE ADMINISTRATION OF ESTATE: You must complete the administration of the estate and file appropriate closing papers with the court. Failure to do so may result in personal assessment of costs. [MCR 5.310]

CHANGE OF ADDRESS: You are required to inform the court and all interested persons of any change in your address within 7 days of the change.

Additional Duties for Supervised Administration

If this is a supervised administration, in addition to the above reporting duties, you are also required to prepare and file with this court the following written reports or information.

INVENTORY: You are required to file with the probate court an inventory of the assets of the estate within 91 days of the date your letters of authority are issued or as ordered by the court. You must send a copy of the inventory to all presumptive distributees and all other interested persons who request it. The inventory must list in reasonable detail all the property owned by the decedent at the time of death. Each listed item must indicate the fair market value at the time of the decedent's death and the type and amount of any encumbrance. Where the decedent's date of death is on or after March 28, 2013, the lien amount will be deducted from the value of the real property for purposes of calculating the inventory fee under MCL 600.871(2). If the value of any item has been obtained through an appraiser, the inventory should include the appraiser's name and address with the item or items appraised by that appraiser. You must also provide the name and address of each financial institution listed on your inventory at the time the inventory is presented to the court. The address for a financial institution shall be either that of the institution's main headquarters or the branch used most frequently by the personal representative. [MCL 700.3706, MCR 5.307, MCR 5.310(E)]

ACCOUNTS: You are required to file with this court once a year, either on the anniversary date that your letters of authority were issued or on another date you choose (you must notify the court of this date) or more often if the court directs, a complete itemized accounting of your administration of the estate. This itemized accounting must show in detail all income and disbursements and the remaining property, together with the form of the property. Subsequent annual and final accountings must be filed within 56 days following the close of the accounting period. When the estate is ready for closing, you are also required to file a final account with a description of property remaining in the estate. All accounts must be served on the required persons at the same time they are filed with the court, along with proof of service.

ESTATE (OR INHERITANCE) TAX INFORMATION: You are required to submit to the court proof that no estate (or inheritance) taxes are due or that the estate (or inheritance) taxes have been paid. **Note:** The estate may be subject to inheritance tax.

Additional Duties for Unsupervised Administration

If this is an unsupervised administration, in addition to the above reporting duties, you are also required to prepare and provide to all interested persons the following written reports or information.

INVENTORY: You are required to prepare an inventory of the assets of the estate within 91 days from the date your letters of authority are issued and to send a copy of the inventory to all presumptive distributees and all other interested persons who request it. The inventory must list in reasonable detail all the property owned by the decedent at the time of death. Each listed item must indicate the fair market value at the time of the decedent's death and the type and amount of any encumbrance. Where the decedent's date of death is on or after March 28, 2013, the lien amount will be deducted from the value of the real property for purposes of calculating the inventory fee under MCL 600.871(2). You are required within 91 days from the date your letters of authority are issued, to submit to the court the information necessary to calculate the probate inventory fee that you must pay to the probate court. You may use the original inventory for this purpose. [MCL 700.3706, MCR 5.307]

ESTATE (OR INHERITANCE) TAX INFORMATION: You may be required to submit to the court proof that no estate (or inheritance) taxes are due or that the estate (or inheritance) taxes have been paid. **Note:** The estate may be subject to inheritance tax.

Approved, SCAO JIS CODE: NIP

STATE OF MICHIGAN PROBATE COURT COUNTY OF OTTAWA	NOTICE OF APPOINTMENT AND DUTIES OF PERSONAL REPRESENTATIVE	FILE NO.

Estate of _____

TO ALL INTERESTED PERSONS:

1. On _____ (Date) I was appointed personal representative as requested in the application or petition for probate of this estate (copy attached unless previously sent). I am serving ☐ without bond. ☐ with bond in the amount of $ _____ .

   The papers related to the estate are on file with the _____ County Probate Court located at _____ (Address) . This ☐ is ☐ is not a supervised administration.

☐ 2. Attached is a copy of the will of the decedent which ☐ was ☐ was not admitted to probate and under which I will administer, manage, and distribute the estate.

3. The court does not supervise the personal representative in the administration of an estate except in limited circumstances.
4. If I was appointed informally, you or another interested person may petition the court objecting to my appointment and/or demanding that I post a bond or an additional bond. The petition must be filed with the probate court along with the applicable fee. Unless the court grants the petition, I will continue to serve as appointed.
5. You or another interested person may petition for a hearing by the court on any matter at any time during the administration of the estate, including for distribution of assets and allowance of expenses of administration. The petition must be filed with the probate court along with the applicable fee.
6. If you continue to be an interested person (such as an heir of an intestate estate or devisee or beneficiary under the will of the decedent), I will provide you with: 1) a copy of the inventory within 91 days of my appointment; 2) unless waived by you, a copy of an account including fiduciary fees and attorney fees charged to the estate, within 1 year of my appointment; and 3) a copy of the closing statement or settlement petition when the estate is ready for closing.
7. To avoid penalties, I must have paid any federal estate and Michigan estate taxes within 9 months after the date of the decedent's death or another time period specified by law.
8. The estate may not be closed earlier than 5 months after the date of my appointment except in limited circumstances. If the estate is not settled within 1 year after my appointment, within 28 days after the anniversary of the appointment, I must file with the court and send to each interested person a notice that the estate remains under administration and the reason for the continuation of the estate. If you do not receive such a notice, you may petition the court for a hearing on the necessity for continued administration or for closure of the estate.

_____
Date of notice

_____ _____
Attorney name Bar no. Name

_____ _____
Address Address

_____ _____
City, state, zip Telephone no. City, state, zip Telephone no.

ATTENTION: **The above duties are not the only duties required of the personal representative**. This notice of appointment must be served on all interested persons within 14 days after the appointment of the personal representative.

Do not write below this line - For court use only

JIS Code: NCT

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	NOTICE TO CREDITORS Decedent's Estate	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

Estate of _____ Date of birth:* _____
First, middle, and last name

***NOTE TO PREPARER:** If a copy of this form is filed with the court, you **must** redact the date of birth from the copy being filed as required by court rule.

TO ALL CREDITORS:**

NOTICE TO CREDITORS: The decedent, _____ , died _____ .
Date

Creditors of the decedent are notified that all claims against the estate will be forever barred unless presented to

_____ , personal representative, or to both the probate

court at _____
Address City

and the personal representative within 4 months after the date of publication of this notice.

_____
Date

_____ _____
Attorney name (type or print) Bar no.

_____
Address

_____
City, state, zip Telephone no.

_____
Personal representative name (type or print)

_____
Address

_____
City, state, zip Telephone no.

PUBLISH ABOVE INFORMATION ONLY

Publish one time in _____ in _____ County
Name of publication

Furnish _____ copies to _____

Furnish affidavit of publication to the probate court with copy to _____

Forward statement for publication charges to _____

****NOTE TO PREPARER:** If there is a known creditor whose address is unknown and cannot be ascertained after diligent inquiry, insert "including [name of creditor] whose address and whereabouts are unknown."

Approved, SCAO JIS CODE: NKC

STATE OF MICHIGAN PROBATE COURT COUNTY OF OTTAWA	NOTICE TO KNOWN CREDITORS	FILE NO.

Estate of _____

TO: _____
Name

_____
Address

_____
City, state, zip

The fiduciary believes you may be a creditor of the estate. The attached notice to creditors was published _____ .
Date

You have four months from the above date of publication or one month from the date this notice is sent to you, whichever is later, to present your written claim or it will be forever barred. You may use the Statement and Proof of Claim (form PC 579) to submit your claim. The written claim must be timely delivered or mailed to the fiduciary listed below. You may also send it to the probate court for filing along with a filing fee of $20.00. You may also commence a suit against the estate in a court.

_____
Date

_____
Name of fiduciary to whom claim should be presented

_____
Attorney name (type or print) Bar no.

_____
Title

_____
Address

_____
Address

_____
City, state, zip Telephone no.

_____
City, state, zip

PROOF OF SERVICE

I certify that on _____ , I served a copy of this notice on the creditor by
Date

☐ personal delivery to the creditor.
☐ mailing, with postage prepaid, to the address indicated in this notice.

I declare under the penalties of perjury that this proof of service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

_____
Date

_____
Signature

Do not write below this line - For court use only

PCS Code: INV
TCS Code: INVF

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	INVENTORY ☐ AMENDED (DECEDENT ESTATE)	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

In the matter of _____
First, middle, and last name of decedent

Personal representative's name, address, and telephone no.	Personal representative's attorney, bar no., address, and telephone no.

I, _____ , personal representative, submit the following as a
Name (type or print)

complete and accurate inventory of all the assets of the estate and the fair market valuations as of _____ .
Date of death

PERSONAL PROPERTY AND REAL PROPERTY DESCRIPTION If property has been used to secure a loan (including an equity line of credit), show the nature and amount of the lien. Definitions and instructions for completing the inventory are on page 2 of this form. The values of all property are calculated as of the decedent's date of death. *For real property only, if the date of death is on or after March 28, 2013, the gross value of a parcel can be reduced by any lien amount on that parcel; however, the remaining inventory value of that parcel cannot be less than zero. For personal property, the gross value and inventory value are the same. (Attach separate sheet if necessary.)

Legal description of real property	Gross value	Lien amount	Inventory value (less lien)*
Legal description of real property	Gross value	Lien amount	Inventory value (less lien)*
Description of personal property	Gross value	Lien amount	Inventory value
Description of personal property	Gross value	Lien amount	Inventory value
Description of personal property	Gross value	Lien amount	Inventory value
Description of personal property	Gross value	Lien amount	Inventory value
Description of personal property	Gross value	Lien amount	Inventory value
Totals	Total Gross Value		Total Inventory Value

I declare under the penalties of perjury that this inventory has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

_____
Date

_____
Attorney signature

_____
Signature

DEFINITIONS:

- **Real property** means land, including a building or house that is built on the land.
- **Personal property** means everything that a person owns except real property. Personal property includes bank accounts and checking accounts.

INSTRUCTIONS TO COMPLETE THE INVENTORY:

1. List all real and personal property in the column **"Personal Property and Real Property Description."**

2. When listing real property, provide the legal description of the property and the name of any other owner.

   a. If real property has been used to secure a loan (including an equity line of credit), show the nature and amount of the lien, and reduce the gross value (value as of date of death) by the amount of the lien, but the inventory value cannot be less than zero.

   b. If the value of real property is determined by an appraisal, include the appraiser's name and address and a description of the property appraised.

   c. If this form is filed in a guardianship, real property that the ward owns jointly or in common with others must be listed along with the type of ownership. The court may require additional information to support the value of property that is stated in the inventory.

   d. For each parcel of real property, calculate the value individually.

3. When listing personal property, provide enough detail to adequately determine the value. Some items should be listed separately and some items should be combined under one category. Provide the name and address of each financial institution listed. The address of a financial institution shall be either that of the institution's main headquarters or the branch used most frequently by the personal representative.

   Do not provide financial account numbers on this form. If an account number is necessary to distinguish between accounts, put it on form MC 97.

   a. Examples of items that should be listed and valued separately are:
      - Automobiles
      - Jewelry
      - Bank accounts
      - Antiques
      - Any other individual item of high value
      - Life insurance if payable to the estate
      - Annuities
      - Mutual funds
      - Stocks and bonds

   b. Examples of items that can be listed in categories are household items such as dishes, flatware, curtains, linens, utensils, clothing, furnishings, etc. These items can be grouped into several categories or combined into one category.

   c. If personal property has been used to secure a loan, show the nature and amount of the lien, but do not deduct the lien amount from the gross value (value as of the date of death) of any item of personal property.

   d. If the value of personal property is determined by an appraisal, include the appraiser's name and address and a description of the property appraised.

   e. If this form is filed in a guardianship, personal property that the ward owns jointly or in common with others must be listed along with the type of ownership. The court may require additional information to support the value of property that is stated in the inventory.

JIS Code: SST

STATE OF MICHIGAN PROBATE COURT OTTAWA COUNTY	SWORN STATEMENT TO CLOSE UNSUPERVISED ADMINISTRATION ☐ SUPPLEMENTAL	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

In the matter of _____
First, middle, and last name

1. I am the personal representative of this estate. Upon filing this sworn statement with the court, this estate will be closed without a hearing. More than five months have passed since the date of the appointment of the original personal representative.

2. If required by law or court rule, I have published notice to creditors, and the time for presentment of claims has expired.

3. I have fully administered this estate by paying, settling, or disposing of the claims that were presented, the estate and administration expenses, and all other taxes. I have distributed the assets of the estate to the persons entitled to the assets.*

4. The interested persons, addresses, and their representatives are identical to those appearing on the initial application/petition, except as follows:

(Check only one box, as appropriate.)

5. ☐ a. The decedent died before October 1, 1993, and no Michigan inheritance tax is due. A certificate of no inheritance tax liability from the Michigan Department of Treasury is attached or has been filed.
   ☐ b. The decedent died on October 1, 1993, or later and no Michigan estate tax is due.
   ☐ c. Michigan estate or inheritance tax has been paid in full. (Evidence of full payment from Michigan Department of Treasury is attached or has been filed.)

6. I sent a copy of this sworn statement to all distributees and to all claimants whose claims are neither paid nor barred and to all demandants. I furnished a full account in writing to the distributees whose interests are affected by the administration.

☐ 7. I reopened the estate and have completed the administration.

I declare under the penalties of perjury that this Sworn Statement to Close Unsupervised Administration has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Personal representative signature	Address
Personal representative name (type or print)	City, state, zip — Telephone no.
Attorney signature	Address
Attorney name (type or print) — Bar no.	City, state, zip — Telephone no.

***Note:** Specify any exceptions. If any claims remain undischarged, state whether the estate was distributed subject to possible liability with the agreement of the distributees, or state in detail other arrangements that were made to accommodate outstanding liabilities.

NOTICE TO INTERESTED PERSON(S): You may object to this sworn statement by filing written objections with the probate court mentioned above along with a $20 filing fee. If an objection is not filed within 28 days after this sworn statement is filed with the court, the probate register will issue a certificate stating that it appears that I have fully administered this estate. The certificate does not preclude any action against me or the surety on a bond I may have obtained. If an action or proceeding involving me is not pending in this court one year after this sworn statement is filed, my appointment ends.

Approved, SCAO

OSM CODE: CIC

STATE OF MICHIGAN PROBATE COURT COUNTY OF OTTAWA	CERTIFICATE OF COMPLETION ☐ SUPPLEMENTAL	FILE NO.

Estate of _____

I certify that:

1. The ☐ sworn closing statement, summary proceeding, small estates
   ☐ sworn statement to close unsupervised administration

   of _____ , the personal representative(s) of the estate, was
   Name

   filed on _____ , more than 28 days ago.
   Date

2. No objection has been filed.

3. The personal representative(s) appear(s) to have fully administered the estate.

_____ _____

Date Register

Do not write below this line - For court use only

Approved, SCAO

JIS CODE: NCD

STATE OF MICHIGAN PROBATE COURT COUNTY OF OTTAWA	NOTICE OF CONTINUED ADMINISTRATION	FILE NO.

Estate of _____

1. The original appointment of the first personal representative occurred on _____ (Date) .

☐ The administration has been continued annually since the date of the original appointment.

☐ The estate was reopened and the first personal representative for the reopened estate was appointed on

_____ (Date) .

2. The estate remains under administration. The continued administration is necessary because:

_____

_____

_____

3. The interested persons, addresses, and their representatives are identical to those appearing on the initial application/petition except as follows: (for each person whose address changed, list the name and new address; attach separate sheet if necessary)

_____

_____

_____

_____
Date

_____
Attorney signature

_____
Attorney name (type or print) Bar no.

_____
Address

_____
City, state, zip Telephone no.

_____
Personal representative signature

_____
Name (type or print)

_____
Address

_____
City, state, zip Telephone no.

NOTE: Send this notice to all interested persons.

Do not write below this line - For court use only

JIS Code: CIF

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT OTTAWA COUNTY	CONTACT INFORMATION ☐ AMENDED	CASE NO. and JUDGE

Court address
414 WASHINGTON ST, ROOM 200, GRAND HAVEN, MI 49417

Court telephone no.
616-786-4110

This form is confidential and not to be served on other parties in this case. Any contact information below that has already been provided or is provided in the future in a public court filing or through the MiFILE system will not be made confidential by this document.

Please provide the following contact information:

1. Your name: _____
First, middle, and last name

2. ☐ a. Telephone number where the court can contact me: _____
This telephone: ☐ can ☐ cannot receive text messages from the court.
☐ can ☐ cannot receive voice messages from the court.

☐ b. I do not have a telephone number where the court can contact me.

3. ☐ a. E-mail address where I can receive e-mails: _____

☐ b. I do not have an e-mail address where I can receive e-mails from the court.

PLEASE READ AND UNDERSTAND THE FOLLOWING:
Upon signing this form, you are consenting to text, e-mail, and/or phone notifications on your court case. If the case is NON-PUBLIC, it is NOT ELIGIBLE for text or phone notifications.

By signing this form, I authorize the OTTAWA COUNTY PROBATE court to notify me of upcoming events in this case.
Name of court

I understand, based on the options chosen above that I will receive text, e-mail, and/or voice notifications to the phone number or e-mail address listed on this form. I also understand that the OTTAWA COUNTY PROBATE court is not responsible for any additional fees or charges due to my phone carrier data rates.
Name of court

In the event that my e-mail, or cell or land line phone number changes, I will notify the court to update their records, and if I fail to do so it will result in the termination of this service from the court.

Privacy Disclaimer: Your contact information is necessary to assist the court in providing important information in a timely manner. Your information will not be sold, distributed, or shared with any other entity. You can OPT-OUT of the system at any time. Simply reply OPTOUT to any received message.

_____ _____
Date Signature