AOC-805 Rev. 11-20 Page 1 of 3

Court of Justice

Doc. Code: PPW or PWF

www.kycourts.gov

Commonwealth of Kentucky

KRS 394.145; 395.015



PETITION

Case No.
Court
County
Division

14.10 00 11.110, 000.0							
IN RE: Estate of							
Decedent's Inform	nation: SSN:	Birthdate:	Date of Death:				
Last Address.							
							
Decedent died:	☐ Intestate (without a Will)	☐ Testate (with a W	/ill)				
		PROBATE OF	WII I	•			
PETITION FOR			T OF ADMINISTRATOR/A	DMINISTRATRIX			
	_	_	T OF EXECUTOR/EXECU	_			
Petitioner states the	ere has been no previous admir						
	at the statements in the caption		•				
	o Petitioner are as follows (<i>use a</i>		• • • • • • • • • • • • • • • • • • • •	,			
Name:		Relation	·	Age:			
Address:							
Name:		Relation	:	Age:			
Address:							
Name		D.L.e		A 7 0 :			
				Age:			
Address:							
				·····			
Decedent owned/had interest in the following real estate with estimated market values as noted:							
Decedent owned/flad interest in the following fear estate with estimated market values as floted.							
			Estimated Total:	\$			

AOC-805 Rev. 11-20 Page 2 of 3

Decedent owned/had interest in the following personal property with estimated market values as noted:				
Petitioner is indebted to or owes Decedent \$	·			
☐ Petitioner applies for probate of Decedent's Will, filed her	rewith, which is his/her Last Will and Testament.			
	, whose address is			
be appointed □ Executor/Executrix □ Administrator/Administ following:	-			
	utrix or Administrator/Administratrix requesting appointment			
	, a resident of this county,			
	as his/her agent for the service of			
	resentative or personally, provided that such personal action			
accrued in the administration of the estate.				
All the foregoing statements are true.				
Petitioner's Signature:	Phone No.:			
Petitioner's Name (<i>Printed</i>):				
Petitioner's Address:				
	ed before me by, this			
day of, 2 For Notaries: My commission expires:	My notary ID number is :			
	Notary Public, State At Large or Circuit Clerk/D.C.			
	ne undersigned in accordance with the meaning and tenor of present separate Order of Probate or complete Order on			
Attorney's Signature:	Phone No.:			
Attorney's Name (Printed):				
Address:				

WAIVER

We, the undersigned, surviving spou	use and next of kin of the ab	ove-named Decedent,	resident of
County, Kentucky, hereby waive notice	ce of the hearing of the Petit	ion and if applicable, th	e presentation of said Decedent's
Will for probate and/or appointment of	of fiduciary, and request the	Court to appoint	
as □ Executor/Executrix □ Administ			
			·····
IN RE: Estate of			
	ORDER		
☐ Petition filed this day of	, 2	·	
☐ Will tendered this day of	. 2		
Upon hearing, the Will offered was p			
PROBATED as the Last Will and Te			
The Court appoints:			
☐ Administrator/Administratrix of said	d estate and fixes bond in th	e sum of \$	uith surety OR
☐ without surety.			
 Date	_, 2		
24.0		goo oigilatalo	

Distribution: Case File

Revenue Cabinet