

**IN THE CIRCUIT COURT OF PLATTE COUNTY, MISSOURI
SIXTH JUDICIAL CIRCUIT, PROBATE DIVISION**

In the Estate of: _____)
 _____)
 _____) Estate Number: _____
 Deceased

APPLICATION FOR LETTERS TESTAMENTARY

Comes now the undersigned applicant and on oath states that decedent, age _____ years, male/female, died on _____, testate whose last residence was _____, and whose domicile was _____ County, State of _____. The Personal Representative named in the will is: _____. The value of decedent's estate is: Personal Property \$ _____; Real Property \$ _____ in _____ County, Missouri: \$ _____ and of real property in Missouri which may be subject to administration: \$ _____.

That applicant believes there are no heirs or devisees whose names and addresses are unknown to applicant, except _____.

The names, relationship to decedent, and residence addresses of the surviving spouse, heirs and devisees and the lineal descendants of devisees who were relatives of the decedent and who predeceased decedent, if any, with an indication of those believed to be mentally incapacitated and the birth dates of those who are minors, and so far as is known to applicant, the names and addresses of the conservators of any minor or disabled devisee or heir or surviving spouse, and all contingent beneficiaries of any testamentary trust, and their relationship to decedent are as follows:

Name	Relationship	Article	Residence Address

This application is made for (supervised/independent) administration.

That _____, has been designated as resident agent for service of process within the State of Missouri and a copy of the designation and acceptance is attached hereto.

If letters are issued, applicant will make a perfect inventory of the estate, pay the debts and legacies, if any, as far as the assets will extend and the law directs and account for and distribute or pay all assets which come into applicant's possession and perform all things required by law touching the administration of the estate.

Wherefore, applicant prays that Letters Testamentary be granted to applicant and that notice of letters granted be published in: _____.

The undersigned swears that the matters set forth in the above are true and correct to the best knowledge and belief of the undersigned, subject to the penalties of making a false affidavit or declaration.

Applicant

Address

City, State, Zip Code

Name/Bar Number of Attorney for Applicant

Address

Telephone Number

REFUSAL TO QUALIFY AS PERSONAL REPRESENTATIVE

The undersigned, being named executor in the will of the above named decedent refuses to qualify.

RENUNCIATION OF RIGHT TO ADMINISTER

The undersigned entitled to administer the estate of the above named decedent hereby renounces the right to administer and request that letters be issued to: _____.
