

## OATH OF PERSONAL REPRESENTATIVE

*Commonwealth of Pennsylvania*  
County of **LACKAWANNA**

The Petitioner(s) herein named swear or affirm that the statements in the foregoing Petition are true and correct to the best of the knowledge and belief of Petitioner(s) and that, as personal representative(s) of the Decedent, Petitioner(s) will well and truly administer the estate according to law.

Sworn to or affirmed and subscribed  
before me this \_\_\_\_\_ day of \_\_\_\_\_,

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

For the Register:  
Linda Munley  
Register of Wills & Clerk of Orphans' Court  
My Commission Expires First Monday,  
January, 2014

## DECREE OF PROBATE AND GRANT OF LETTERS

Estate of \_\_\_\_\_, Deceased File Number: 35 - \_\_\_\_\_ - \_\_\_\_\_

**AND NOW**, this \_\_\_\_\_ day of \_\_\_\_\_, in consideration of the Petition on the reverse side hereon, satisfactory proof having been presented before me, **IT IS DECREED** that Letters \_\_\_\_\_ Testamentary \_\_\_\_\_ of Administration \_\_\_\_\_ are hereby granted to:  
(If applicable, enter c.t.a., d.b.n., d.b.n.c.t.a., etc.)

\_\_\_\_\_ in the above estate and that instruments(s) dated \_\_\_\_\_ described in the petition be admitted to probate and filed of record as the last Will and Codicil(s) of Decedent.

\_\_\_\_\_  
Linda Munley  
Register of Wills/ Clerk of Orphans Court  
My Commission Expires First Monday, January, 2014

**FEES:**

Letters	_____
( ) Short Certificates	_____
Renunciations	_____
Other	_____
Tax & Inventory	<u>35.00</u>
Records Management	<u>10.00</u>
Automation Fee	<u>11.50</u>
JCS Fee	<u>23.50</u>
<b>TOTAL</b>	\$ _____

*Signature of Counsel Required to Enter an Appearance*

Attorney Signature: \_\_\_\_\_  
Attorney Name: \_\_\_\_\_  
Supreme Court ID: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_

IN THE COURT OF COMMON PLEAS OF LACKAWANNA COUNTY, PENNSYLVANIA  
Register of Wills

PETITION FOR PROBATE AND GRANT OF LETTERS

Estate of \_\_\_\_\_, Deceased      ESTATE NO: \_\_\_\_\_  
a/k/a: \_\_\_\_\_  
a/k/a: \_\_\_\_\_  
a/k/a: \_\_\_\_\_      SS NO: \_\_\_\_\_

Petitioner(s) who is/are 18 yrs of age or older, apply(ies) for: (COMPLETE SECTION A OR B AND C as applicable)

A. Probate and Grant of Letters     Testamentary     Administration

\_\_\_\_\_  
CTA, DBN, or DBN CTA

and aver that Petitioner(s) is/are entitled to the aforementioned Letters \_\_\_\_\_ under  
the last Will of the above-named Decedent, dated \_\_\_\_\_ and codicil(s) dated \_\_\_\_\_

(State relevant circumstances, e.g. renunciation, death of executor, etc.)

Except as follows, Decedent did not marry, was not divorced, and did not have a child born or adopted after execution of the instruments offered for probate; was not the victim of a killing, was never adjudicated an incapacitated person, and was not a party to a pending divorce proceeding at the time of death wherein grounds for divorce had been established as defined in 23 PA C.S. section 3323(g): \_\_\_\_\_

B. Grant of Letters of Administration \_\_\_\_\_  
(If applicable, enter c.t.a., d.b.n., d.b.n.c.t.a., etc.)

C. Petitioner(s), after a proper search, has/have ascertained that Decedent left no Will and was survived by the following spouse (if any) and heirs: (If Administration c.t.a. or d.b.n.c.t.a. enter date of Will in Section A and complete list of heirs)

Name	Address	Relationship to Decedent

USE ADDITIONAL SHEETS IF NECESSARY

**THIS SECTION MUST BE COMPLETED:**

Decedent was domiciled at death in Lackawanna County, Pennsylvania, with his/her last family or principal residence at \_\_\_\_\_

Street address with Post Office and Zip Code, Municipality: Township, Borough, City

Decedent, then \_\_\_\_\_ years of age, died \_\_\_\_\_ at \_\_\_\_\_  
Month, Day, Year of Death      City and State where death occurred

Note: No "UNKNOWN" values will be accepted

Estimated value of decedent's property at death:  
\_ If domiciled in PA      All personal property      \$ \_\_\_\_\_  
\_ If not domiciled in PA      Personal property in Pennsylvania      \$ \_\_\_\_\_  
\_ If not domiciled in PA      Personal property in County      \$ \_\_\_\_\_  
\_ Value of Real Estate in Pennsylvania      \$ \_\_\_\_\_  
Total Estimated Value      \$ \_\_\_\_\_

Location of Real Estate in Pennsylvania: (Provide full address if possible.) \_\_\_\_\_

Signature(s)	Personal Representative Name and Mailing Address