STATE OF SOUTH CAROLINA	) IN THE PROBATE COURT	
COUNTY OF CHESTER	) ) ) APPLICATION/*PETITION FOR ) SUCCESSOR PERSONAL REPRESENTATIVE	
IN THE MATTER OF: (Decedent)	) CASE NUMBER: )	
*ONLY COMPLETE THIS SECTION IF FILING PETITION FOR SUBSEQUENT ADMINISTRATION * Petitioner(s) vs. * Respondent(s)		
INFORMAL     The previous/original application/petition is adopted.	unless noted on the amended FORM 300ES attached hereto.	
	y qualified and acting Personal Representative(s) for this estate is/	
If not previously filed with the Court, a copy of the above Personal Representative's death certificate, resignation or termination of appointment is attached.		
The name(s) and address(es) of the proposed Succ	essor Personal Representative(s) is/are:	
Priority for appointment of the Successor Personal Representative is: named as Primary Personal Representative in Will named as Alternate Personal Representative in Will nominee of above Primary Personal Representative in Will nominee of above Alternate Personal Representative in Will surviving spouse of Decedent who is devisee of Decedent or nominee of said spouse other devisee of Decedent (describe): or nominee of said devisee		

- ] other devisee of Decedent (describe):
- surviving spouse of Decedent or nominee of said spouse
- other heir of Decedent (describe): or nominee of said heir
- creditor (Forty-five (45) days after death must have passed) or nominee of creditor; written statement of claim, Form #371ES, is attached
- other (describe):

## \*NOTE: IF THIS IS A FORMAL PROCEEDING, IN ADDITION TO A PETITION, YOU MUST ALSO FILE A SUMMONS (FORM SCCA 401PC) AND PAY THE STATUTORY FILING FEE OF \$150.00. A HEARING IN THE PROBATE COURT ON THE PETITION MAY BE REQUIRED.

## VERIFICATION

The undersigned, being sworn, states that the facts set forth in the foregoing statements are true to the best of the undersigned's knowledge, information and belief; and hereby submits to the Court's jurisdiction in this matter.

SWORN to before me this day of,	20Signature:20Print Name:Address:	
Notary Public for South Caro My Commission Expires:	(Home): (Cell): Email:	
	Relationship to Decedent/Estate:	

## **ORDER FOR HEARING**

IT IS HEREBY ORDERED that a hearing on this matter be set for:

DATE:	
TIME:	
PLACE:	

Pursuant to SCPC 62-1-401, Petitioner is ordered to give notice of this hearing to all interested persons at least twenty (20) days prior to the hearing.

Executed this	day of	20		
				Terri B Zion, Probate Court Judge
OI	RDER OF AP	POINTM	ENT	
IT IS HEREBY ORDERED that the above applica	ation/petition	for Succe	ssor Per	sonal Representative be
Fiduciary Bond in the amount of \$ Bond not required for Personal Represer	ntative nomin	ated bv V	Vill	

 $\overline{]}$  Bond not required as Personal Representative is sole heir or sole devisee

Bond not required					
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ł Bond waivers filed

- See order dated
- Other:

Executed this day of , 20 .

Terri B Zion, Probate Court Judge

## QUALIFICATION AND STATEMENT OF ACCEPTANCE

I accept this appointment and agree to perform the duties and discharge the trust of the office of Successor Personal Representative of this estate and hereby submit to the Court's jurisdiction in this matter.

Signature:	
Print Name:	
Address:	
Telephone (Work):	
(Home):	
(Cell):	
Èmail:	
Attorney:	
Address:	
Telephone:	
Email:	