

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF CHESTER )  
 )

IN THE PROBATE COURT  
CASE NO:

IN THE MATTER OF THE ESTATE  
FOR

- )  
 )  
Petitioner(s), )  
 )  
vs. )  
 )  
 )  
 )  
\_\_\_\_\_)  
Respondent(s). )  
\_\_\_\_\_ )

**SUMMONS**

**TO THE RESPONDENTS LISTED ABOVE:**

YOU ARE HEREBY SUMMONED and required to Answer the Petition in this action, a copy of which is herewith served upon you , and to serve a copy of your Answer upon the Petitioner(s) listed above at the following address(es):

\_\_\_\_\_  
(Name, PRINT)

\_\_\_\_\_  
(Street address or mailing address, PRINT)

\_\_\_\_\_  
(City, State, and zip code, PRINT)

Your Answer must be served on the Petitioner at the above address within **thirty (30) days** after the service of this Summons and Petition upon you, exclusive of the day of such service; and if you fail to Answer the Petition within that time, the Petitioner(s) will ask the Court for a judgment by default for the relief demanded in the Petition.

\_\_\_\_\_  
Signature of Petitioner(s)

Date: \_\_\_\_\_

STATE OF SOUTH CAROLINA

IN THE PROBATE COURT

COUNTY OF CHESTER

IN THE MATTER OF:

CASE NUMBER: \_\_\_\_\_

\_\_\_\_\_  
(Decedent)

Petitioner

vs.

**\*PETITION FOR SALE OF REAL PROPERTY**

\_\_\_\_\_  
Respondent(s)

Petitioner alleges the following:

1. Interested parties to the estate that would be affected by the sale of the real property are as follows:

A. The names and addresses of the devisees in the Will, if any, and the dates of birth of any minors:

Name	Year of Birth	Address	Relationship to Decedent
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(use additional sheet if necessary)

B. If the Decedent died intestate (without a Will) or if the time to challenge the Decedent's Will admitted to probate has not expired, then the names and addresses of intestate heirs who are not devisees, if any, and the dates of birth of any minors:

Name	Year of Birth	Address	Relationship to Decedent
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(use additional sheet if necessary)

C. The names and addresses of all Creditors who have properly presented a claim(s) against the estate which remain(s) unresolved:

Name	Address
_____	_____
_____	_____
_____	_____

(use additional sheet if necessary)

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

D. The names and addresses of any other interested persons affected by this proceeding:

Name	Year of Birth	Address	Relationship to Decedent
_____	_____	_____	_____
_____	_____	_____	_____

(use additional sheet if necessary)

E. The name(s) and address(es) of the Personal Representative(s) of the estate (if not the Petitioner):

Name	Address
_____	_____
_____	_____

2. The real property needs to be sold because: \_\_\_\_\_  
\_\_\_\_\_

3. The real property of the Decedent's estate, which the Petitioner desires to sell, is described as follows:

a. Address:

\_\_\_\_\_

b. Legal Description: (The Decedent's deed may be required by the Court)

\_\_\_\_\_

c. Tax Map Sheet Number (TMS#) / Deed Book and Page:

\_\_\_\_\_

4. The tax assessed value of the real property is: \$\_\_\_\_\_. This value is based upon the most recent assessor's statement. The assessor's statement may be required by the Court.

5. The fair market value of the real property is: \$\_\_\_\_\_. This value is based upon the opinion of a real estate agent based upon a comparative market analysis or the opinion of a real estate appraiser based upon an appraisal. The comparative market analysis or the appraisal may be required by the Court.

Executed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_

(Home): \_\_\_\_\_

(Cell): \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to Decedent/Estate: \_\_\_\_\_

Attorney: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_