

**IN THE ORPHANS' COURT FOR**  
**(OR)** \_\_\_\_\_, **MARYLAND**  
**BEFORE THE REGISTER OF WILLS FOR**

**IN THE ESTATE OF:**

**ESTATE NO.** \_\_\_\_\_

**FOR:**

- |                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>REGULAR ESTATE<br/>                 PETITION FOR ADMINISTRATION</b><br>Estate value in excess of \$50,000<br>(If Spouse is sole heir or legatee, \$100,000.)<br>Values for Date of Death before October 1, 2012<br>are \$30,000 and \$50,000 if spouse is the sole<br>legatee or heir.<br>Complete and attach <b>Schedule A.</b> | <input type="checkbox"/> <b>SMALL ESTATE<br/>                 PETITION FOR ADMINISTRATION</b><br>Estate value of \$50,000 or less<br>(If Spouse is sole heir or legatee, \$100,000.)<br>Values for Date of Death before October 1, 2012<br>are \$30,000 and \$50,000 if spouse is the sole<br>legatee or heir.<br>Complete and attach <b>Schedule B.</b> | <input type="checkbox"/> <b>WILL OF NO ESTATE<br/>                 Complete items 2 and 5</b><br><br><input type="checkbox"/> <b>LIMITED ORDERS<br/>                 Complete item 2 and<br/>                 attach Schedule C</b> |
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The Petition of:

Name	Address
Name	Address
Name	Address

Each of us states:

1. I am (a) at least 18 years of age and either a citizen of the United States or a permanent resident of the United States who is the spouse of the decedent, an ancestor of the decedent, a descendant of the decedent, or a sibling of the decedent or (b) a trust company or any other corporation authorized by law to act as a personal representative.
  
2. The Decedent, \_\_\_\_\_, was domiciled in \_\_\_\_\_, State of \_\_\_\_\_ and died on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_ (County) \_\_\_\_\_ (place of death)
  
3. If the decedent was not domiciled in this county at the time of death, this is the proper office in which to file this petition because: \_\_\_\_\_
  
4. I am entitled to priority of appointment as personal representative of the decedent's estate pursuant to §5-104 of the Estates and Trusts Article, Annotated Code of Maryland because: \_\_\_\_\_  
 \_\_\_\_\_  
 and I am not excluded by §5-105(b) of the Estates and Trusts Article, Annotated Code of Maryland from serving as personal representative.

5. I have made a diligent search for the decedent's will and to the best of my knowledge:

none exists; or

the will dated \_\_\_\_\_ (including codicils, if any, dated \_\_\_\_\_)

accompanying this petition is the last will and it came into my hands in the following manner:

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

and the names and last known addresses of the witnesses are:

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

6. Other proceedings, if any, regarding the decedent or the estate are as follows:

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

7. If any information required by paragraphs 2 through 6 has not been furnished, the reason is:

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

8. If appointed, I accept the duties of the office of personal representative and consent to personal jurisdiction in any action brought in this State against me as personal representative or arising out of the duties of the office of personal representative.

**WHEREFORE**, I request appointment as personal representative of the decedent's estate and the following relief as indicated:

that the will and codicils, if any, be admitted to administrative probate;

that the will and codicils, if any, be admitted to judicial probate;

that the will and codicils, if any, be filed only;

that only a limited order be issued;

that the following additional relief be granted: \_\_\_\_\_  
\_\_\_\_\_

I solemnly affirm under the penalties of perjury that the contents of the foregoing petition are true to the best of my knowledge, information and belief.

\_\_\_\_\_  
Attorney

\_\_\_\_\_  
Petitioner Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Petitioner Date

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Petitioner Date

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number (optional)