

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

CLASSIFICATION FORM FOR ESTATES

[Check one of the following: A., B., C., or D]

- A. This estate requires full administration. The following special instructions are given to the Court **[Check if applicable: 1. and/or 2.]**
1. A citation to the surviving spouse shall be required in this estate.
2. Pursuant to R.C. 2109.301(B), the estate is not required to file a partial account or a final account. A Certificate of Termination shall be filed herein.
- B. This estate is being opened to pursue a claim for wrongful death or survival action as a result of personal injury, and there are no assets to administer.
- C. There are probate assets to administer, and this estate will remain open to pursue a claim for wrongful death or survival action as a result of personal injury.
- D. This estate is being opened solely for the purpose of filing or continuing a cause of action in favor of or against the decedent's estate.

**NOTICE TO EXTEND ADMINISTRATION
[R.C. 2109.301, Sup. R 78(B) and (C)]**

The undersigned hereby gives notice to extend the administration beyond six months for the following reason(s):

- An Ohio estate tax return must be filed for the estate.
- A proceeding contesting the validity of the decedent's will pursuant to R.C. 2107.71 has been commenced.
- The surviving spouse has filed an election to take against the will.
- The administrator or executor is a party in a civil action, Case No. _____ in _____
- The estate is insolvent.

An account or certificate of termination shall be due no later than thirteen months after the appointment of the fiduciary.

CERTIFICATION

THE UNDERSIGNED HAS PERSONALLY EXAMINED THE INDEX OF WILLS DEPOSITED PURSUANT TO R.C. 2107.08 AND CERTIFIES THAT ALL WILLS ON DEPOSIT, REGARDLESS OF THE DATE OF EXECUTION, HAVE BEEN ADMITTED TO PROBATE OR FILED FOR RECORD PURPOSES ONLY. [Sup. Rule 59(A)]

- _____
 Attorney for the Estate
 Fiduciary for the Estate

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

APPLICATION TO APPROVE ATTORNEY FEE

The undersigned consent to the payment of an attorney fee of \$ _____ to _____

We understand that the following are among the factors considered as guides in determining the reasonableness of the fee and believe that the fee for which approval is requested is reasonable under said factors.

- A) The time and labor required.
- B) The fee customarily charged in the locality for similar legal services.
- C) The amount involved and the results obtained.

The following guide is not a fee schedule but is intended as a guide in estimating the fee customarily charged in this locality for similar services, including expenses incurred for the filing of forms and pleadings.

	<u>ASSET TOTAL</u>	<u>FEE</u>
1) Probate Personal Property (including Gross Sale Price from sale of Real Estate)		
The first \$50,000 at a rate of 5.5%	\$ _____	at 5.5% \$ _____
All above \$50,000 and not exceeding \$100,000 at a rate of 4.5%	\$ _____	at 4.5% \$ _____
All above \$100,000 and not exceeding \$400,000 at a rate of 3.5%	\$ _____	at 3.5% \$ _____
All above \$400,000 at a rate of 2%	\$ _____	at 2% \$ _____
2) Probate Real Estate Not Sold		
A) Passing to the Surviving Spouse at the rate of 1%	\$ _____	at 1% \$ _____
B) On all other real estate subject to administration		
For the first \$200,000 at the rate of 2%	\$ _____	at 2% \$ _____
All above \$200,000 at the rate of 1%	\$ _____	at 1% \$ _____
3) Non-Probate Assets		
A) Joint and Survivorship to Spouse at the rate of .5%	\$ _____	at .5% \$ _____
B) All other property as defined by Local Rule 71.1 at 1%	\$ _____	at 1% \$ _____

TOTAL GUIDELINE FEE \$ _____

FEE FOR WHICH APPROVAL IS REQUESTED \$ _____

Attorney

Fiduciary

Beneficiary

Beneficiary

ENTRY

- The fee for which approval is requested is approved pursuant to the Court's Rules.
- Based upon the amount of the fee for which approval is requested, the consents contained in this application and a review of the attorney's time records for services both within and outside the guideline; said fee is approved.
- The application to approve attorney fee is ordered set for hearing. Notice of the hearing shall be sent by the attorney for the fiduciary to all interested parties and their counsel by certified mail.

Judge

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

APPLICATION FOR AUTHORITY TO ADMINISTER ESTATE

[R.C. 2109.02 and 2109.07]

[For Executors and all Administrators; attach supplemental application for ancillary administration, if applicable]

Applicant states that decedent died on _____

Decedent's domicile was _____

Street Address

City or Village, or Township if unincorporated area

County

Post Office

State

Zip Code

Applicant asks to be appointed _____
of decedent's estate- **[Check whichever of the following are applicable]** To applicant's knowledge, decedent did not leave a Will - Decedent's Will has been admitted to probate in this Court A supplemental application for ancillary administration is attached.

Attached is a list of the surviving spouse, children, next of kin, legatees and devisees, known to applicant, which list includes those persons entitled to administer the estate.

The estimated value of the estate is:

Personal property	\$ _____
Annual real property rentals	\$ _____
Subtotal, personalty and rentals	\$ _____
Real Property	\$ _____
Total estimated estate	\$ _____
Applicant owes the estate	\$ _____
The estate owes applicant	\$ _____

[Check one of the following four paragraphs]

- Applicant says that decedent's Will requests that no bond be required of, and therefore asks the Court to dispense with bond.
- Applicant is a trust company duly qualified in Ohio, and bond is dispensed with by law.

CASE NO. _____

Applicant is decedent's surviving spouse and is entitled to the entire net proceeds of the estate, or applicant is the next of kin entitled to the entire net proceeds of the estate and there is no will. Bond is dispensed with by law.

Applicant offers the attached bond in the amount of \$ _____

Applicant accepts the duties of fiduciary in the estate imposed by law, and such additional duties as may be required by the Court. Applicant acknowledges being subject to removal as fiduciary for failure to perform such duties as required, and also acknowledges being subject to criminal penalties for improper conversion of any property held as fiduciary.

Attorney for Applicant

Typed or Printed Name

Address

Phone Number (include area code)

Attorney Registration No. _____

Applicant

Typed or Printed Name

Address

Phone Number (include area code)

WAIVER OF RIGHT TO ADMINISTER
[R.C. 2113.06]

The undersigned, being persons entitled to administer decedent's estate, and whose priority of right to do so is equal or superior to that of applicant, hereby waive appointment to administer the estate.

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

**FIDUCIARY'S ACCEPTANCE
(EXECUTOR/ADMINISTRATOR)**

I, the undersigned, hereby accept the duties which are required of me by law, and such additional duties as are ordered by the Court. As executor/administrator of the estate I will:

- 1) Give notice of the admission of the will to probate to all heirs and beneficiaries within 2 weeks and file a certificate of notice of probate of will within 2 months.
- 2) Make and file any inventory of the real and personal assets of the estate within 3 months after appointment, or such time as extended by the Court.
- 3) Deposit funds which come into my hands in a lawful depository located within this State. Estate checking accounts must provide canceled checks, as these canceled checks may be required to prove the accounts.
- 4) Keep estate funds in separate estate accounts at all times during the administration of the estate.
- 5) Invest all funds, in a lawful manner.
- 6) Make and file the final and distributive account within 6 months following my appointment, or such time thereafter as extended by the Court.
- 7) File all tax documents as required by law.
- 8) Maintain adequate insurance to reasonably protect any property that I may hold as a fiduciary.
- 9) Obey all Orders of the Court.

I acknowledge that I am subject to removal as such fiduciary if I fail to perform such duties. I further acknowledge that I am subject to possible civil and criminal penalties for improper conversion of the property that I hold as a fiduciary.

NOTICE: Attorney fees shall not be paid until the final account is prepared for filing unless otherwise approved by the Court.

Every fiduciary, before entering upon the execution of a trust, shall receive letters of appointment from a probate court having jurisdiction of the subject matter of the trust. [R.C. 2109.02].

Date

(Executor/Administrator)

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

WAIVER OF RIGHT TO ADMINISTER

Application of _____ for
appointment to administer decedent's estate.

The undersigned, being persons entitled to administer decedent's estate, and whose priority of right to do so is equal or superior to that of the applicant, hereby waive appointment to administer the estate.

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____ , DECEASED

CASE NO. _____

**ENTRY SETTING HEARING ON APPLICATION TO
ADMINISTER ESTATE**

The Court sets _____ at _____ o'clock ____ M.
as the date and time for hearing on the application to administer decedent's estate. The Court
orders notice to take or renounce administration to be given to those persons entitled to
administer decedent's estate, whose priority of right is equal or superior to that of applicant,
and who have not waived, appointment to administer the estate.

Date

James A. Shriver, Probate Judge

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

**NOTICE AND CITATION OF HEARING ON APPOINTMENT OF FIDUCIARY
[R.C. 2113.06 and 2113.07]**

To the following persons:

Name

Address

_____ has filed an application in this Court, asking to be appointed to administer decedent's estate.

The hearing on the application will be held _____
at _____ o'clock ____ .M. in this Court.

The Court is located at 2379 Clermont Center Drive, Batavia, Ohio 45103.

You are one of the persons entitled to administer decedents estate, and if you wish to be considered for appointment to do so you must apply to this Court. If you do not apply, it will be considered that you renounce your right to administer the estate. The Court may appoint any suitable and competent person to administer the estate, giving due weight to relative priority of right to do so. Even if you decline appointment yourself, if you know of any reason why the above applicant is not suitable or competent, you should appear and inform the Court.

James A. Shriver, Probate Judge/Attorney

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

ENTRY APPOINTING FIDUCIARY- LETTERS OF AUTHORITY

[For Executors and all Administrators]

Name and Title of Fiduciary _____

On hearing in open Court the application of the above fiduciary for authority to administer decedent's estate, the Court finds that;

Decedent died **[check one of the following]** testate - intestate - on _____, domiciled in _____

[Check one of the following] Bond is dispensed with by the Will - Bond is dispensed with by law - Applicant has executed and filed an appropriate bond, which is approved by the Court; and

Applicant is a suitable and competent person to execute the trust.

The Court therefore appoints applicant as such fiduciary, with the power conferred by law to fully administer decedent's estate. This entry of appointment constitutes the fiduciary's letters of authority.

_____ Date

_____ James A. Shriver, Probate Judge

CERTIFICATE OF APPOINTMENT AND INCUMBENCY

The above document is a true copy of the original kept by me as custodian of the records of this Court. It constitutes the appointment and letters of authority of the named fiduciary, who is qualified and acting in such capacity.

[Seal]

_____ James A. Shriver, Probate Judge

by: _____
Clerk

_____ Date

PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE

ESTATE OF _____, DECEASED

CASE NO. _____

APPOINTMENT OF APPRAISER

[R.C. 2115.02 & 2115.06]

The fiduciary / applicant appoints _____ to appraise those assets of decedent's estate which do not have readily ascertainable value, and asks the Court to approve the appointment. Subject to Court approval on the amount of such compensation, the fiduciary agrees to pay the appraiser reasonable compensation for the services as part of the expenses of administering the estate.

The fiduciary / applicant will use the valuation of the real property by the County Auditor.

CERTIFICATION

The fiduciary/applicant hereby certifies that the appraiser appointed above is qualified in accordance with the Local Rules of Court

Date

Fiduciary / Applicant

ENTRY APPROVING APPRAISER / ENTRY SETTING HEARING

The application is hereby approved.

The Court sets _____ at _____ o'clock ____ .M. as the date and time for hearing the above appointment of appraiser.

Date

Probate Judge

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

INVENTORY AND APPRAISAL

[R.C. 2115.02 AND 2115.09] - Date Of Death Post April 5, 2017

To the knowledge of the fiduciary the attached schedule of assets in decedent's estate is complete. The fiduciary determined the value of those assets whose values were readily ascertainable and which were not appraised by the appraiser, and that such values are correct.

The estate is recapitulated as follows:

Tangible personal property	\$ _____
Intangible personal property	\$ _____
Real property	\$ _____
Total	\$ _____
Automobiles transferred to surviving spouse under R.C. 2106.18	
Value(s):\$ _____, \$ _____, \$ _____, \$ _____	
\$ _____, \$ _____, \$ _____, \$ _____	
Total value [not to exceed \$65,000.00]	\$ _____

Insofar as it can be ascertained, an Ohio Estate Tax Return will will not be filed

The fiduciary is also the surviving spouse of the decedent and waives notice of the taking of the inventory.

Attorney

Fiduciary

Attorney Registration No. _____

APPRAISER'S CERTIFICATE

The undersigned appraiser agreed to act as appraiser of decedent's estate and to appraise the property exhibited truly, honestly, impartially, and to the best of the appraiser's knowledge and ability. The appraiser further says that those assets whose values were not readily ascertainable are indicated on the attached schedule by a check in the "Appraised" column opposite each such item, and that such values are correct.

Appraiser

CASE NO. _____

WAIVER OF NOTICE OF TAKING OF INVENTORY

[R.C. 2115.04]-Date Of Death Post April 5, 2017

The undersigned surviving spouse hereby waives notice of the time and place of taking the inventory of decedent's estate.

Surviving Spouse

WAIVER OF NOTICE OF HEARING ON INVENTORY

[Use when notice is required by the Court or deemed necessary by the fiduciary]

The undersigned, who are interested in the estate, waive notice of the hearing on the inventory.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

INVENTORY AND APPRAISAL
[R.C. 2115.02 AND 2115.09]

To the knowledge of the fiduciary the attached schedule of assets in decedent's estate is complete. The fiduciary determined the value of those assets whose values were readily ascertainable and which were not appraised by the appraiser, and that such values are correct.

The estate is recapitulated as follows:

Tangible personal property	_____	\$ _____
Intangible personal property	_____	\$ _____
Real property	_____	\$ _____
Total	_____	\$ _____

First automobile transferred to surviving spouse
Under R.C. 2106.18 _____ value \$ _____
Second automobile transferred to surviving spouse
under R.C. 2106.18 _____ value \$ _____
Total value [not to exceed \$40,000.00] _____ \$ _____

Insofar as it can be ascertained, an Ohio Estate Tax Return will will not be filed

The fiduciary is also the surviving spouse of the decedent and waives notice of the taking of the inventory.

Attorney

Fiduciary

Attorney Registration No. _____

APPRAISER'S CERTIFICATE

The undersigned appraiser agreed to act as appraiser of decedent's estate and to appraise the property exhibited truly, honestly, impartially, and to the best of the appraiser's knowledge and ability. The appraiser further says that those assets whose values were not readily ascertainable are indicated on the attached schedule by a check in the "Appraised" column opposite each such item, and that such values are correct.

Appraiser

CASE NO. _____

WAIVER OF NOTICE OF TAKING OF INVENTORY
[R.C. 2115.04]

The undersigned surviving spouse hereby waives notice of the time and place of taking the inventory of decedent's estate.

Surviving Spouse

WAIVER OF NOTICE OF HEARING ON INVENTORY
[Use when notice is required by the Court or deemed necessary by the fiduciary]

The undersigned, who are interested in the estate, waive notice of the hearing on the inventory.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

PROBATE COURT OF CLERMONT COUNTY, OHIO

JAMES A. SHRIVER, JUDGE

ESTATE OF _____, DECEASED

CASE NO. _____

WAIVER OF NOTICE OF HEARING ON INVENTORY

[Use when notice is required by the Court or deemed necessary by the fiduciary]

The undersigned, who are interested in the estate, waive notice of the hearing on the inventory, acknowledge receipt of a copy of the schedule of assets and consent to the approval of the inventory.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

ENTRY SETTING HEARING ON INVENTORY

The Court sets _____ at _____ o'clock ____ M.
as the date and time for hearing the inventory of decedent's estate. The Court orders that
notice of the hearing on the inventory be given to all parties entitled to notice.

Date

James A. Shriver, Probate Judge

PROBATE COURT OF CLERMONT COUNTY, OHIO

ESTATE OF _____ DECEASED

CASE NO. _____

ATTORNEY CERTIFICATION

The undersigned attorney for the fiduciary in this estate certifies that attached notice of hearing on the inventory (Form 6.3) along with a copy of the schedule of assets (Form 6.1) have been served by ordinary mail upon all interested parties as defined in Local Rule 61.2. That none of the mailings have been returned as undelivered.

Attorney

PROBATE COURT OF CLERMONT COUNTY, OHIO

ESTATE OF: _____, DECEASED

CASE NO: _____

NOTICE OF HEARING ON INVENTORY

(ORC 2115.16)

To the following persons:

Name Address

Name Address

Name Address

Name Address

The inventory of decedent's assets has been filed in this Court.

The hearing on the inventory will be held _____, at _____ o'clock
A.M./P.M. in this Court.

The Court is located at 2379 Clermont Center Drive, Batavia, Ohio 45103.

You may file exceptions to the inventory at any time prior to five days before the date set for the hearing.

Judge/Attorney

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____ , DECEASED

CASE NO. _____

ENTRY APPROVING INVENTORY

The Inventory and Appraisal in the within estate having been filed and those persons entitled to notice of the hearing on the inventory of said estate having either waived notice of the same or been given notice of same in accordance with law, the inventory and appraisal is hereby approved.

James A. Shriver, Probate Judge

Attorney

Attorney Registration No. _____

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF: _____, **DECEASED**
CASE NO. _____

**CERTIFICATION OF NOTICE TO ADMINISTRATOR OF
MEDICAID ESTATE RECOVERY PROGRAM**

[R.C. 2117.061 AND 5162.21]

**THIS FORM SHALL BE FILED IN THE PROBATE COURT UPON COMPLETION
OF NOTICE TO ADMINISTRATOR**

The undersigned certifies that a Notice in compliance with Ohio Revised Code 2117.061 and 5162.21 was served upon the following by a method authorized by Civil Rule 73 on the _____ day of _____, 20____.

Medicaid Estate Recovery
150 E. Gay Street, 21st Floor
Columbus, Ohio 43215

Attorney for Applicant

Person Responsible for the Estate

Typed or Printed Name

Typed or Printed Name

Address

Address

City, State, Zip Code

City, State, Zip Code

Telephone Number (include area code)

Telephone Number (include area code)

Attorney Registration Number. _____

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF: _____, **DECEASED**
CASE NO. _____

**NOTICE TO ADMINISTRATOR OF
MEDICAID ESTATE RECOVERY PROGRAM**
[R.C. 2117.061 AND 5162.21]

**IF THE ESTATE OF THE DECEDENT IS SUBJECT TO MEDICAID ESTATE RECOVERY
PROGRAM PURSUANT TO R.C. 5162.21, THIS NOTICE SHALL BE FILLED WITH THE
ADMINISTRATOR OF THE PROGRAM AT THE FOLLOWING ADDRESS:**

**Medicaid Estate Recovery
150 E. Gay Street, 21st Floor
Columbus, Ohio 43215**

**THIS IS NOT A PUBLIC RECORD AND SHALL NOT BE FILED IN THE
PROBATE COURT**

The undersigned person responsible for the estate hereby states the following:

1. Name of Decedent: _____
2. Address of Decedent: _____

3. Date of Birth: _____ Age: _____
4. Date of Death: _____
5. Social Security Number: _____
6. Check all applicable boxes:

A Copy of the Schedule of Assets (Form 6.1) or Assets and Liabilities (Form 5.1) is attached.

A schedule of any other real and personal property and other assets in which the decedent had any legal Title or interest at the time of death (to the extent of the interest), including assets conveyed to a survivor, heir, or assign of the individual through joint tenancy, tenancy in common, survivorship, life estate, living trust, or other arrangement;

The spouse of the decedent was subject to the Medicaid estate recovery program, a separate notice is being submitted for the pre-deceased spouse.

Signature - Person Responsible for the Estate

Typed or Printed Name

Address

City, State, Zip Code

Telephone Number (include area code)

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, Deceased

CASE NO. _____

MEDICAID RECOVERY ACKNOWLEDGMENT

(ORC Section 2117.06 and Loc.R. 62.1)

As the person responsible for the Estate (Executor, Administrator, Commissioner, or the person who filed for a Release or Summary Release), I acknowledge that it is my duty to ascertain within thirty (30) days whether the decedent was –

- (1) fifty-five (55) years of age or over on the date of death; **and**
- (2) a recipient of medical assistance (Medicaid) benefits under Ohio Revised Code Chapter 5162 (formerly RC Chapter 5111).

I further acknowledge that if the answer to **both** of those determinations is “yes”, then I have a further duty to prepare a Notice of Administrator of Medicaid Estate Recovery Program – Form 7.0(A); mail a copy of it to:

**Administrator
Medicaid Estate Recovery
150 E. Gay Street
21st Floor
Columbus, OH 43215**

and file a Certification of Notice to Administrator of Medicaid Estate Recovery Program (Form 7.0).

At this time, I can say that: (A) I must mail and file the Notice;
(B) I do not have to mail or file the Notice; or (C) I have not determined whether I must mail and file the Notice.

Dated: _____

(Printed)
Person Responsible for the Estate

(Required to be filed in every estate without an attorney)

PROBATE COURT OF CLERMONT COUNTY, OHIO

ESTATE OF: _____, DECEASED

CASE NO. _____

APPLICATION FOR SALE/TRANSFER OF MOTOR VEHICLE

The undersigned, qualified fiduciary of the above estate, represents that the applicant has in their possession the following described motor vehicle, belonging to said estate:

Year _____ Body Type _____ Model _____ Make _____

Mfs. Serial No. _____ Cert. Of Title No. _____

Applicant states that the following person is entitled to such motor vehicle:

- by a specific bequest to legatee named in will or sole beneficiary of estate
- by allowance for support ORC 2106.13 at inventory value
- by in kind distribution for \$ _____ with consent of remaining beneficiaries set forth below
- by purchase for \$ _____
- pursuant to summary release from administration [R.C. 2113.031(D) (3)]
- other _____

Applicant requests that the above mentioned motor vehicle be transferred to:

Name

Address

Necessary Consents:

Applicant

ENTRY AUTHORIZING SALE/TRANSFER OR MOTOR VEHICLE

The Court finds that the application is well taken and that the above transferee is entitled to such motor vehicle and; **It is therefore ordered** that said fiduciary transfer said motor vehicle as prayed for.

Attorney

Magistrate

Judge

PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE

ESTATE OF _____ DECEASED

CASE NO. _____

APPLICATION FOR CERTIFICATE OF TRANSFER
[R.C. 2113.61]

Applicant states that decedent died on _____.

Decedent's domicile at death was _____

Street Address

City or Village, or Township if unincorporated area County

Post Office State Zip Code

Decedent died owning the real property described in the accompanying Certificate of Transfer No. _____, which also lists those persons to whom the real property passed. Applicant asks the Court to issue a Certificate of Transfer so that new ownership interests may be recorded.

[Check the applicable boxes]

- Decedent died intestate.
- Decedent died testate on _____; will admitted to probate on _____.
- Decedent's known debts have been paid or secured to be paid.
- Sufficient other assets are in hand to pay decedent's known debts.
- Estate is insolvent and the transfer shall apply toward the allowance for support.
- Applicant was appointed by this Court on _____ and is the qualified and acting executor or administrator of decedent's estate.
- Executor or administrator of decedent's estate failed to file this application before being discharged.
- Applicant is the executor or administrator appointed in another state. There is and has been no ancillary administration in Ohio. The real property to be transferred is located in this county.
- The transfer is subject to a written contract for the sale and conveyance of the real property, entered into but uncompleted by decedent before death. A copy of the contract is attached.
- There has been no administration and none is contemplated [R.C. 2113.61(D)].
- The transfer is pursuant to decedent's Will.
- The transfer is pursuant to the statutes of descent and distribution.
- The transfer is pursuant to summary release from administration [R.C. 2113.031(D)(3)].
- The real property to be transferred is subject to a charge in favor of the surviving spouse in the amount of \$_____ as computed pursuant to R.C. 2106.11 on attached Exhibit A, and as shown on the accompanying Certificate of Transfer, in respect of the unpaid balance of the specific monetary share which is part of the surviving spouse's total intestate share.

CASE NO. _____

- Spousal elections have been exercised.
- Disclaimers or assignments have been filed.
- The transfer is of decedent's entire interest in the mansion house to the surviving spouse, who hereby elects to take such interest as part or all of the intestate share and/or allowance for support. **[If this paragraph is checked, the following must be completed, and both the surviving spouse and applicant must sign this form].**

The value of the total intestate share to which decedent's surviving spouse is entitled is \$ _____

The value of the allowance for support to which decedent's surviving spouse is entitled is \$ _____

The value of decedent's entire interest in the mansion house is:

Interest in mansion house \$ _____

Interest in household goods in house \$ _____

Interest in lots or farm land adjacent to house and used in conjunction with it, which are described in Certificate of Transfer and which spouse hereby elects to include \$ _____

Less: Decedent's share of liens on any and all of above \$ _____

Total \$ _____ \$ _____

Surviving Spouse

Applicant

Title or status

ENTRY ISSUING CERTIFICATE OF TRANSFER

The Court finding that the above application contains the information required by statute orders that Certificate of Transfer No. _____ be filed with this Entry and a copy of the Certificate of Transfer be issued for recording.

[Check if applicable] The Court further finds that the transfer is subject to a charge pursuant to R. C. 2106.11.

Date

Probate Judge

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

ENTRY ISSUING CERTIFICATE OF TRANSFER

The Court finding that the above application contains information required by statute orders that Certificate of Transfer No. _____ be filed with this Entry and a copy of the Certificate of Transfer be issued for recording.

[Check if applicable] The Court further finds that the transfer is subject to a charge pursuant to R.C. 2106.11.

Date

James A. Shriver, Probate Judge

CASE NO. _____

The legal description of decedent's interest in the real property subject to this certificate is: **[use extra sheets, if necessary]**.

Prior Instrument Reference:

Parcel No:

This instrument was prepared by _____

ISSUANCE

This Certificate of Transfer is issued this _____ day of _____, _____.

James A. Shriver, Probate Judge

AUTHENTICATION

I certify that the above document is a true copy of the original Certificate of Transfer No. _____ issued on _____ and kept by me as custodian of the official records of this Court.

Date

James A. Shriver, Probate Judge

By: _____
Deputy Clerk

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

FIDUCIARY'S ACCOUNT

[R.C. 2109.30, 2109.301, and 2109.32]

[Executors and Administrators]

The fiduciary offers the account given below and on the attached itemized statement of receipts and disbursements. The fiduciary states that the account is correct, and asks that it be approved and settled.

[Check one of the following]

- This is a partial account. A statement of the assets remaining in the fiduciary's hands is attached.
- This is a final account. A statement of the assets remaining in the fiduciary's hands for distribution to the beneficiaries is attached.
- This is an account of distribution, and fiduciary asks to be discharged upon its approval and settlement.
- This is a final and distributive account, and the fiduciary asks to be discharged upon its approval and settlement.
- This is a supplemental final account.

[Complete if this is a partial account, or if one or more accounts have previously been filed in the estate]

The period of this account is from:

_____ to _____

[Complete if applicable] Accounts previously filed in the estate, the accounting periods, and the fiduciary and attorney fees paid for each period, are as follows.

Date Filed	Accounting Period	Fiduciary Fees Paid	Attorney Fees Paid
		\$	\$

Note:
2117.06(K) states: "The distributee maybe liable to the estate up to the value of the distribution and maybe required to return all or any part of the value of the distribution if a valid claim is subsequently made against the estate within the time permitted under this section."
2109.32(C) states: "The rights of any person with a pecuniary interest in the estate are not barred by approval of an account pursuant to division (A) and (13) of this section. These rights may be barred following a hearing on the account pursuant to section 2109.33 of the Revised Code."

This account is recapitulated as follows:

RECEIPTS

Personal property not sold.....	\$ _____
Proceeds from sale of personal property.....	_____
Real property not sold.....	_____
Proceeds from sale of real property.....	_____
Income.....	_____
Other receipts.....	_____
Total receipts.....	\$ _____

DISBURSEMENTS

Fiduciary fees this accounting period.....	\$ _____
Attorney fees this accounting period.....	_____
Other administration costs and expenses.....	_____
Debts and claims against estate.....	_____
Ohio and federal estate taxes.....	_____
Personal property distributed in kind.....	_____
Real property transferred.....	_____
Other distributions to beneficiaries.....	_____
Other disbursements.....	_____
Total disbursements.....	\$ _____

BALANCE REMAINING IN FIDUCIARY'S HANDS.....\$ _____

Attorney

Fiduciary

Attorney Registration No. _____

Date

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

**TRUST OF
GUARDIANSHIP OF
ESTATE OF _____**

CASE NO. _____

WAIVER OF NOTICE OF HEARING ON ACCOUNT

The undersigned, who are interested in the estate, waive notice of the hearing on the account, and consent to the approval of the account.

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

**TRUST OF
GUARDIANSHIP OF
ESTATE OF _____**

CASE NO. _____

ENTRY SETTING HEARING ON ACCOUNT

The Court sets _____ at _____ o'clock a.m. as the date and time for hearing on the current/final account in this matter. The Court orders that notice of the hearing on the account, and a copy of the account, be given to all parties entitled to notice, who do not waive the same, at least fifteen (15) days prior to the date and time set for hearing as set forth in Local Rule 64.1.

Date

Probate Judge

Attorney

Attorney Registration No. _____

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

IN THE MATTER OF _____

CASE NO. _____

AFFIDAVIT IN PROOF OF SERVICE

(Civ. R. 73(F))

STATE OF OHIO, COUNTY OF _____, SS.

_____, being first duly sworn, says that on the
____ day of _____, _____ s/he served a copy of the attached
_____ upon
_____ by:

- certified or express mail, or commercial carrier service: return receipt is attached.
- ordinary mail on _____, 20____ : returned envelope showing mail "refused" or "unclaimed" is attached.
- personal service by _____ on _____, 20____ .
- residence service by _____ on _____, 20____ .
- ordinary mail on _____, 20____ as permitted by local rule, court order or law.

Affiant

Sworn to before me and subscribed in my presence this ____ day of _____,
_____.

Notary Public/Deputy Clerk

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

TRUST OF:
GUARDIANSHIP OF:
ESTATE OF: _____

CASE NO. _____

NOTICE OF HEARING ON ACCOUNT

To the following persons:

Name Address

Name Address

Name Address

Name Address

A _____ account in the within case has been filed.

The hearing on the account will be held _____ at _____ o'clock _____.M.

The Court is located at 2379 Clermont Center Drive, Batavia, Ohio 45103.

You are required to examine the account to inquire into the contents of the account and into all matters that may come before the Court at the hearing on the account. Any exceptions to the account must be filed in writing at least five days prior to the date set for the hearing. Absent the filing of written exceptions, the account may be approved without further notice.

Fiduciary/Attorney

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____
CASE NO. _____

**CERTIFICATION OF SERVICE OF ACCOUNT
TO HEIRS OR BENEFICIARIES
[R.C. 2109.32]**

This is to certify that a true and accurate copy of the _____ account was
Type of Account

served _____ upon all beneficiaries of the estate except'.
Date

The following heir or beneficiary whose address is unknown: _____

The following beneficiaries of a specific bequest or devise who has received his or her
distribution and for which a receipt has been filed or exhibited with the Court:

Attorney

Fiduciary

Attorney Registration No. _____

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

**TRUST OF
GUARDIANSHIP OF
ESTATE OF** _____

CASE NO. _____

ENTRY APPROVING AND SETTLING ACCOUNT

[R.C. 2109.32]

Upon hearing the account filed _____, the Court finds that:

[Check whichever of the following are applicable]

- The _____ partial account has been lawfully administered.
- The events have occurred after which the Court may approve and settle a final account.
- The events have occurred after which the Court may approve and settle a supplemental final account.

The account is therefore approved and settled.

[Check whichever of the following are applicable]

The fiduciary shall be discharged without further order of the Court twelve months following the approval of the final and distributive account unless discharged by this entry.

- The fiduciary is discharged herewith.
- The surety bond is terminated herewith.
- This is a final account of a (deceased) (removed) (resigned) fiduciary. The estate shall remain open.
- This is a final account of the guardianship for the estate only. This matter shall continue as a person only guardianship.
- This is a final account of a beneficiary of a trust. The trust estate shall remain open for other beneficiaries of the trust.

Date

James A. Shriver, Probate Judge

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

**CERTIFICATE OF TERMINATION
[R.C. 2109.30]**

I certify I am the executor or administrator and the sole legatee, devisee or heir.

I further certify:

- (1) all debts and claims presented to the estate have been paid in full or settled finally;
- (2) an estate tax return, if required under Chapter 5731 of the Revised Code, has been filed, and any estate tax due under that chapter has been paid;
- (3) all attorney fees for the administration of probate assets have been [check one]
 waived by counsel of record, paid to counsel of record in the amount of \$ _____;
- (4) all fiduciary fees have been [check one] waived by the fiduciary; paid to the fiduciary in the amount of \$ _____;
- (5) all assets remaining after completion of the activities described above have been distributed to myself as the sole legatee, devisee or heir.

Attorney for Fiduciary

Fiduciary

Attorney Registration No. _____

ENTRY

Based upon the above certification it is ordered that the fiduciary and surety, if any, are discharged.

James A. Shriver, Probate Judge

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____

CASE NO. _____

**APPLICATION TO EXTEND ADMINISTRATION
[R.C. 2109.301, Sup. R. 78(B) and (C)]**

This is the initial application subsequent application to extend administration of the estate.

The undersigned fiduciary applies to extend the administration of the estate. The fiduciary states it would be detrimental to the estate and its beneficiaries or heirs to file a final and distributive account or certificate of termination within the prescribed time for the following reasons (state with specificity):

Attorney

Fiduciary

Attorney Registration No. _____

ENTRY

Upon consideration of the Application, the Court orders:

- An account or certificate of termination shall be due not later than thirteen months after the appointment of the fiduciary.
- A final and distributive account or certificate of termination is due _____
- The Application is denied.
- Other: _____

James A. Shriver, Probate Judge

**PROBATE COURT OF CLERMONT COUNTY, OHIO
JAMES A. SHRIVER, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

STATUS REPORT

Pursuant to the Rules of Superintendence and the Local Rules of Court, the fiduciary states that the estate cannot be closed at this time and hereby submits this written Status Report. **[Check whichever of the following apply]:**

- There is a wrongful death or survival action pending in (specify Court and Case No.)

Expected Trial Date _____
- There is litigation (in favor of/against) the estate pending in (specify Court and Case No.)

Expected Trial Date _____
- The estate is being audited by Internal Revenue Service or Ohio Department of Taxation. Expected Date of Resolution _____
- There are insufficient liquid assets in the estate to pay the Ohio Estate Taxes, and the estate has been granted an extension to pay the same. Extension Date _____
- The primary asset of the estate is real property which has not been sold or transferred.
Expected Date of Sale or Transfer _____
- Other (please provide specifics) _____

- Additional explanation is attached hereto.

Attorney for Estate

Fiduciary

Attorney Registration Number

Date