

**IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT IN AND FOR  
SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION**

**IN RE: ESTATE OF**

Case No. \_\_\_\_\_

\_\_\_\_\_  
**Deceased**

**PETITION FOR ADMINISTRATION  
Testate (With Will)**

Petitioner(s), \_\_\_\_\_ alleges:

1. Petitioner(s) has/have an interest in the above Estate as the \_\_\_\_\_ of the decedent.

PETITIONER(S) NAME(S)	ADDRESS(ES)

2. Decedent, \_\_\_\_\_, whose last known address was \_\_\_\_\_, and the last four digits of whose social security number are \_\_\_\_\_, died on \_\_\_\_\_, at \_\_\_\_\_, in \_\_\_\_\_(city) , Florida. On the date of death, decedent was domiciled in Seminole County, Florida.
3. So far as is known, the names of the beneficiaries of this estate and of the decedent's surviving spouse, if any, their addresses and relationships to decedent, and the years of birth of any who are minors, are:

NAME	ADDRESS	RELATIONSHIP TO DECEDENT	YEAR OF BIRTH [if minor]


4. The venue of this proceeding is in this county because this is the county where the decedent was domiciled at the time of his/her death.
5. Petitioner(s) \_\_\_\_\_, whose address is \_\_\_\_\_, is qualified to serve as Personal Representative because he/she has not been convicted of a felony, are mentally and physically able to perform the duties of Personal Representatives, are eighteen (18) years of age or older, ( )is ( )is not a resident of Florida, and is qualified to serve as the Personal Representative(s) under the provisions of Florida Statute, Section 733.304.
6. Petitioner(s) has/have not been convicted in any state or foreign jurisdiction of abuse, neglect, or exploitation of an elderly person or disabled adult, as those terms are defined in Florida Statute Section 825.101.
7. No persons have equal or higher preference to be appointed Personal Representatives.
8. The nature and approximate value of the assets in this Estate are:

NATURE OF ASSETS	ESTIMATED VALUE
<b>Parcel ID:</b>	
<b>Legal Description:</b>	

9. This Estate ( ) will ( ) will not be required to file a federal estate tax return.
10. Domiciliary or principal proceedings are not known to be pending in another state or country.
11. The decedent's Last Will and Testament dated \_\_\_\_\_ and codicil dated \_\_\_\_\_, are in the possession of the Court.

Petitioner(s) are unaware of any unrevoked will or codicil of decedent other than as set forth in paragraph 11.

Petitioner(s) request that the decedent's Last Will and Testament dated \_\_\_\_\_ and codicil dated \_\_\_\_\_, be admitted to probate and that Petitioner(s) \_\_\_\_\_ be appointed as Personal Representative(s) of the Estate of the decedent.

Under penalties of perjury, we declare that we have read the foregoing, and the facts alleged are true, to the best of our knowledge and belief.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_, 2022.

\_\_\_\_\_  
Signature of Petitioner

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

\_\_\_\_\_  
Signature of Petitioner

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

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL  
CIRCUIT IN AND FOR SEMINOLE COUNTY, FLORIDA.

IN RE: ESTATE OF \_\_\_\_\_

CASE NO: \_\_\_\_\_

**NOTICE OF CONFIDENTIAL INFORMATION WITHIN COURT FILING**

Pursuant to Florida Rule of Judicial Administration 2.420(d)(2), the filer of a court record at the time of filing shall indicate whether any confidential information is included within the document being filed; identify the confidentiality provision that applies to the identified information; and identify the precise location of the confidential information within the document being filed.

Title/Type of Documents(s): \_\_\_\_\_

**Indicate the applicable confidentiality provision(s) below from Rule 2.420(1)(B), by specifying the location within the document on the space provided:**

- \_\_\_\_\_ Chapter 39 records relating to dependency matter, termination of parental rights, guardians as litem, child abuse, neglect and abandonment. §39.0132(3), Fla. Stat. (If the document is filed within a Chapter 39 case, this form is not required.)
- \_\_\_\_\_ Adoption records. §63.162, Fla. Stat. (If the document is filed within a Chapter 63 adoption case, this form is not required.)
- \_\_\_\_\_ Social Security, bank account, charge, debit, and credit card numbers in court records. §119.0714(1)(i)-(j), (2)(a)-(e), Fla. Stat. (Unless redaction is requested pursuant to §119.0714(2), Fla. Stat. this information is exempt only as of January 1, 2012).
- \_\_\_\_\_ HIV test result and patient identity within the HIV results. §381.004(2)(e), Fla. Stat.
- \_\_\_\_\_ Sexually Transmitted diseases— test results and identity within the test results when provided by the Department of Health or the department’s authorized representative. §384.29, Fla. Stat.
- \_\_\_\_\_ Birth and death certificates, including court-issued delayed birth certificates and fetal death certificates. §382.008(6) and §382.025(1)(a), Fla. Stat.
- \_\_\_\_\_ Identifying information in petition by minor for waiver of parental notice when seeking to terminate pregnancy. §390.01116, Fla. Stat. (If the document is filed within a Ch. 390 waiver of parental notice case, this form is not required.)
- \_\_\_\_\_ Identifying information in clinical mental health records under the Baker Act. §394.4615(7), Fla. Stat.
- \_\_\_\_\_ Records of substance abuse service providers which pertain to the identity, diagnosis, and prognosis of and service provision to individuals who have received services from substance abuse service providers. §397.501(7), Fla. Stat.

- \_\_\_\_\_ Identifying information in clinical records of detained criminal defendants found incompetent to proceed or acquitted by reason of insanity. §916.107(8), Fla. Stat.
- \_\_\_\_\_ Estate inventories and accountings. §733.604(1), Fla. Stat.
- \_\_\_\_\_ Victim’s address in domestic violence action on petitioner’s request. §741.30(3)(b), Fla. Stat.
- \_\_\_\_\_ Information identifying victims of sexual offenses, including child sexual abuse. §119.071(2)(h) and §119.0714(1)(h), Fla. Stat.
- \_\_\_\_\_ Gestational surrogacy records. §742.16(9), Fla. Stat.
- \_\_\_\_\_ Guardianship reports and orders appointing court monitors in guardianship cases. §744.1076 and §744.3701, Fla. Stat.
- \_\_\_\_\_ Grand jury records. Ch 905, Fla. Stat. (If the document is filed in a Ch. 905 grand jury proceeding this form is not required.)
- \_\_\_\_\_ Information acquired by courts and law enforcement regarding family services for children. §984.06(3)-(4), Fla. Stat. (If the document is filed in a Ch. 984 family services for children case, this form is not required.)
- \_\_\_\_\_ Juvenile delinquency records. §985.04(1) and §985.045(2), Fla. Stat. (If the document is filed in a Ch. 985 juvenile delinquency case, this form is not required.)
- \_\_\_\_\_ Information disclosing the identity of persons subject to tuberculosis proceedings and records of the Department of Health in suspected tuberculosis cases. §392.545 and §392.65, Fla. Stat.
- \_\_\_\_\_ Complete presentence investigation reports. Fla. R. Crim. P. 3.712.
- \_\_\_\_\_ Forensic behavioral health evaluations under Chapter 916. §916.1065, Fla. Stat.
- \_\_\_\_\_ Eligibility screening, substance abuse screening, behavioral health evaluations, and treatment status reports for defendants referred to or considered for referral to a drug court program. §397.334(10)(a), Fla. Stat.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Printed Name of Petitioner

**Note:** The clerk of court shall review filings identified as containing information to determine whether the information is facially subject to confidentiality under the identified provision. The clerk shall notify the filer in writing within 5 days if the clerk determines that the information is NOT subject to confidentiality, and the records shall not be held as confidential for more than 10 days, unless a motion is filed pursuant to subdivision (d)(3) of Rule 2.420.

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT  
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF:

File No: \_\_\_\_\_

\_\_\_\_\_ /

Deceased.

**OATH OF PERSONAL REPRESENTATIVE**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, (Affiant), state under oath that:

1. I am qualified within the provisions of sections 733.302, 733.303, and 733.304, Florida Statutes, to serve as personal representative of the estate of \_\_\_\_\_, deceased. I have reviewed the statutes and understand the qualifications. Under penalties of perjury, I certify that the following statements are true:

- a. I am 18 years of age or older.
- b. I have never been convicted of a felony.
- c. I have never been convicted in any state or foreign jurisdiction of abuse,

neglect, or exploitation of an elderly person or a disabled adult, as those terms are defined in section 825.101, Florida Statutes.

d. I am mentally and physically able to perform that duties of personal representative.

e. I am a resident of the State of Florida, or, if I am not a resident of the State of Florida, I am:

\_\_\_ a legally adopted child or adoptive parent of the decedent;

\_\_\_ related by lineal consanguinity to the decedent; a spouse or a brother, sister, uncle, aunt, nephew, or niece of the decedent, or someone related by lineal consanguinity to any such person; or

\_\_\_ the spouse of a person otherwise qualified under one of the provisions above.

2. I will faithfully administer the estate of the decedent according to law.  
3. My place of residence is \_\_\_\_\_, and my post office address is \_\_\_\_\_.

4. I will promptly file and serve a notice on all interested persons at any time I know that I would not be qualified for appointment and will include the reason I would not then be qualified and the date on which the disqualifying event occurred.

5. I will file and serve a notice within 20 days on all interested persons, in the event there is a change in my residence address, street address, or mailing address.

\_\_\_\_\_  
Affiant

Sworn to (or affirmed) and subscribed before me by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public-  
State of Florida  
(Print, Type, or Stamp  
Commissioned Name of Notary  
Public)

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT  
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF

FILE No: \_\_\_\_\_

\_\_\_\_\_/   
DECEASED

DIVISION \_\_\_\_\_

ORDER ADMITTING WILL TO PROBATE  
AND APPOINTING PERSONAL REPRESENTATIVE  
(self-proved)

The instrument presented to this Court as the last will of \_\_\_\_\_, deceased, having been executed in conformity with law, and made self-proved by the acknowledgment of the decedent and the affidavits of the witnesses, made before an officer authorized to administer oaths and evidenced by the officer's certificate attached to or following the will in the form required by law, and no objection having been made to its probate, and the Court finding that decedent died on \_\_\_\_\_, 20\_\_\_\_, and that \_\_\_\_\_ is entitled and qualified to be Personal Representative, it is

**ADJUDGED** that the Last Will and Testament dated \_\_\_\_\_, 20\_\_\_\_, and attested by \_\_\_\_\_ and \_\_\_\_\_ as subscribing and attesting witnesses, is admitted to probate according to law as the Last Will and Testament of the decedent, and it is further

**ADJUDGED** that \_\_\_\_\_ is appointed Personal Representative of the Estate of the decedent, and that upon taking the prescribed oath, filing the designation and acceptance of resident agent, and filing bond in the sum of \$\_\_\_\_\_, Letters of Administration shall be issued.

**DONE and ORDERED** on \_\_\_\_\_, 20\_\_\_\_ in Chambers in Sanford, Seminole County, Florida.

\_\_\_\_\_  
CIRCUIT JUDGE



IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT  
IN AND FOR SEMINOLE COUNTY, FLORIDA, PROBATE DIVISION

IN RE: ESTATE OF

FILE No: \_\_\_\_\_

\_\_\_\_\_/   
DECEASED

DIVISION \_\_\_\_\_

**LETTERS OF ADMINISTRATION**  
(single/multiple personal representative(s))  
(testate)

**TO ALL WHOM IT MAY CONCERN:**

**WHEREAS,** \_\_\_\_\_, a resident of Seminole County, Florida, died on \_\_\_\_\_, \_\_\_\_\_, owning assets in the State of Florida, and

**WHEREAS,** \_\_\_\_\_, has been appointed Personal Representative of the Estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

**NOW, THEREFORE, I,** the undersigned Circuit Judge, declare \_\_\_\_\_  
\_\_\_\_\_ duly qualified under the law of the State of Florida to act as Personal Representative of the Estate of \_\_\_\_\_, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

**DONE and ORDERED,** on \_\_\_\_\_, \_\_\_\_\_, 2022 in Chambers in Sanford, Seminole County, Florida.

\_\_\_\_\_  
CIRCUIT JUDGE

IN THE \_\_\_\_\_ COURT OF THE 18TH JUDICIAL  
CIRCUIT IN AND FOR SEMINOLE COUNTY, FLORIDA

\_\_\_\_\_  
Plaintiff/Petitioner

Citation #(s): \_\_\_\_\_

vs.

Case #(s): \_\_\_\_\_

\_\_\_\_\_  
Defendant/Respondent

**DESIGNATION OF E-MAIL ADDRESS FOR A PARTY NOT REPRESENTED BY AN  
ATTORNEY**

**\*\*Not to be used in cases governed by the Florida Family Law Rules of Procedure; in cases governed by the Florida Family Law Rules of Procedure, use Florida Supreme Court Approved Family Law Form 12.915\*\***

Pursuant to Fla. R. Gen. Prac. & Jud. Admin. 2.516(b)(1)(C), I, (name) \_\_\_\_\_, designate the e-mail address(es) below for electronic service of all documents related to this case.

By completing this form, I am authorizing the court, clerk of court, and all parties to send copies of notices, orders, judgments, motions, pleadings, or other written communications to me by e-mail or through the Florida Courts E-filing Portal.

I understand that I must keep the clerk's office and the opposing party or parties notified of my current e-mail address(es) and that all copies of notices, orders, judgments, motions, pleadings, or other written communications in this case will be served at the e-mail address(es) on record at the clerk's office.

(Designated e-mail address) \_\_\_\_\_

(Secondary designated e-mail address(es) (if any)) \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that a copy hereof has been furnished to the Clerk of Court for Seminole County and (insert name(s) and address(es) of parties used for service) \_\_\_\_\_

by  e-mail  delivery  mail on (date) \_\_\_\_\_.

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(e-mail address)

\_\_\_\_\_  
(address)

\_\_\_\_\_  
(phone number)