



Oconee County Probate Court

Post Office Box 471

Walhalla, SC 29691

Phone (864) 638-4275 Fax (864) 638-4278

Enclosed you will find our information worksheet. Please fill out any questions and sections left blank. Once completed, return this document to me in the self-addressed envelope I have provided for you. You may FedEx us these documents, or you can utilize our drop box located at 415 S. Pine Street Walhalla, SC 29691. Be sure to enclose the ORIGINAL Last Will and Testament (if available), the ORIGINAL Death Certificate, and a copy of a paid funeral receipt/funeral invoice. When I receive this document back, I will process it accordingly and get back in contact with you for the next steps shortly thereafter. Thank you, and please call me if you have any questions. I send you my kindest regards in these difficult times.

Sincerely,

Oconee County Probate Court

Please fill out this form in its ENTIRETY in order for our court to accept it.

TODAY'S DATE: _____

PETITIONER'S INFORMATION:

YOUR NAME: _____

YOUR ADDRESS: _____

PHONE #: (HOME): _____ (CELL): _____

EMAIL ADDRESS: _____

*YOUR RELATIONSHIP TO THE DECEDENT: _____

DECEDENT'S INFORMATION:

NAME OF DECEDENT: _____

DATE OF DEATH: _____

COUNTY AND STATE OF RESIDENCE OF THE DECEDENT AT THE TIME OF DEATH:

1. DID THE DECEDENT HAVE A WILL? _____ YES _____ NO

*(if yes, you **MUST SUBMIT THE ORIGINAL!!** The court WILL NOT accept a copy)*

2. WHO IS NAMED AS PERSONAL REPRESENTATIVE IN THE WILL?

3. WAS THE DECEDENT MARRIED AT THE TIME OF DEATH?

_____ YES _____ NO

NAME OF SPOUSE: _____

PHONE NUMBER: _____

4. DID THE DECEDENT HAVE ANY LIVING CHILDREN? _____ YES _____ NO

(If yes, please list all children above the age of eighteen (18) below along with their current address (This includes all biological and legally adopted children.)

1. _____
2. _____
3. _____
4. _____
5. _____

5. ARE ANY OF THE LIVING CHILDREN MINORS? _____ YES _____ NO

(If yes, please list all minor children below with their current address (This includes all biological and legally adopted children.)

1. _____
2. _____
3. _____
4. _____
5. _____

6. DID THE DECEDENT HAVE ANY DECEASED CHILDREN? _____ YES _____ NO

(If yes, please list all deceased children below.)

1. _____
2. _____
3. _____
4. _____
5. _____

*DID ANY DECEASED CHILDREN OF THE DECEDENT HAVE CHILDREN? __ YES __ NO

(IF YOU CHECKED YES TO QUESTION FIVE (5) PLEASE LIST THEIR CHILDREN BELOW:

1. _____
2. _____
3. _____
4. _____
5. _____

ASSET INFORMATION:

DID THE DECEDENT OWN ANY OF THE FOLLOWING:

1. REAL ESTATE? _____ YES _____ NO

(If yes, please list any and ALL property below along with the addresses.)

1. _____
2. _____
3. _____
4. _____
5. _____

*** If the Decedent owned property, please provide our office with a copy of the deed for each property.**

IS ANY OF THE PROPERTY LISTED ABOVE CONSIDERED JOINT WITH THE RIGHTS OF SURVIVORSHIP OR A LIFE ESTATE? _____ YES _____ NO

(If you are not sure, you can obtain this information from the property deed)

(If you answered yes, please list that property below along with the address.)

1. _____
2. _____
3. _____
4. _____
5. _____

2. BANK ACCOUNTS? _____ YES _____ NO

If yes, are the accounts joint with anyone? _____ YES _____ NO

***(Please provide our office with the latest bank statement)**

3. SAFE DEPOSIT BOX? _____ YES _____ NO

If yes, is the safe deposit box joint with anyone? _____ YES _____ NO

4. STOCKS OR BONDS? _____ YES _____ NO

If yes, were these transferable on death/ payable on death? _____ YES _____ NO

5. VEHICLES? _____ YES _____ NO

If yes, are the vehicles listed in the decedent's name alone? _____ YES _____ NO

If the vehicle is jointly owned, please **CIRCLE** whether the title is listed: **AND / OR** in between owner's names.

6. BOATS? _____ YES _____ NO

If yes, are the boats listed in the decedent name alone? _____ YES _____ NO

If the boat is jointly owned, please **CIRCLE** whether the title is listed: **AND / OR** in between owner's names.

7. MOTORS? _____ YES _____ NO

If yes, are the motors listed in the decedent name alone? _____ YES _____ NO

If the motor is jointly owned, please **CIRCLE** whether the title is listed: **AND / OR** in between owner's names.

8. LIFE INSURANCE? _____ YES _____ NO

*(If yes, is this payable to the **ESTATE** or to a **BENEFICIARY**? (CIRCLE ONE)*

9. HAS THE FUNERAL BEEN PAID IN FULL? _____ YES _____ NO

(If yes, please include a paid funeral bill receipt with this paperwork. If the funeral bill is NOT yet paid in full, please provide our office with an invoice from the funeral home)

10. WILL THIS ESTATE BE INVOLVED IN LITIGATION? _____ YES _____ NO

*** Due to the COVID numbers rising, we are not meeting with clients face to face. Our office is working primarily by mail for estate openings, and communication thereafter. Probate paperwork is usually returned within 2-3 weeks after the court receives it. We appreciate your patience as we process your case as quickly as possible. ***

PLEASE PROVIDE OUR OFFICE WITH THE ORIGINAL LAST WILL AND TESTAMENT, DEATH CERTIFICATE AND A PAID FUNERAL RECEIPT IF AVAILABLE.