IN THE CIRCUIT COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT,
IN AND FOR BROWARD COUNTY, FLORIDA
PROBATE DIVISION

CHECKLIST FOR PETITION FOR FORMAL ADMINISTRATION OF INTESTATE ESTATE

This Checklist must be completed and e-filed with your Petition. Review and sign the applicable certification clause at the end of the checklist prior to submitting it with your Petition. If any of the items below are not checked, please complete "Certification B." Completing and e-filing this Checklist does not obviate any additional obligations imposed by rule or statute.

HEARING:

☐	At the time of filing this Petition, I intend to pursue this Petition on ex-parte, motion, or special set calendar.

OR

☐	At the time of filing this Petition, I intend to have this Petition submitted to the Judge without a hearing.

CASE NUMBER: PRC - _____-_____ In Re Estate of:_____

☐	A death certificate was filed.
☐	An Affidavit Concerning Criminal History[1] was filed (form available on the Seventeenth Judicial Circuit's Webpage).
☐	An Affidavit of Heirs was filed (form available on the Seventeenth Judicial Circuit's Webpage).
☐	The Petition is verified.
☐	The Petition is signed by the interested person(s).
☐	The Petition is signed by an attorney of record.
☐	The Petition includes the Petitioner's relationship to decedent and the Petitioner's residence.
☐	The Petitioner is not a convicted felon and the Petitioner is a Florida resident. If the Petitioner is not a Florida resident, the Petitioner is related to the decedent within the statutorily required degree.
☐	The correct beneficiaries are listed in the Petition with the birthdates of the minor beneficiaries, if any.
☐	The proposed personal representative has preference of appointment in an intestate administration.
☐	The assets of the estate and the approximate value of the assets are listed in the Petition.
☐	An oath of personal representative and designation of resident agent were filed, and they comply with the applicable probate rules.

[1] Please note that trust companies, banks, as well as other qualified corporations identified in section 733.305, Florida Statutes, are not required to file this affidavit.

☐	A proposed order appointing personal representative was filed, and the order provides space for the Court to enter a bond in its discretion.
☐	The signature page of the proposed order contains at least four (4) lines of text and has the case number on it.
☐	Proposed letters of administration were filed and contain at least (4) lines of text on the signature page.

Please complete the Certification that applies to your filing (either Certification A or Certification B). If Petitioner is represented by counsel, only counsel must complete the applicable Certification Clause. If Petitioner is pro se then the applicable Certification must be completed by Petitioner.

CERTIFICATION A:

The undersigned Petitioner ☐ (print name) _____ /Attorney ☐ (print name) _____ certifies that he/she has reviewed the information necessary to support the Petition for Formal Administration of Intestate Estate. The Petitioner ☐ / Attorney ☐ further certifies that all the required information was previously filed or filed concurrently with the Petition. The Petitioner ☐ / Attorney ☐ acknowledges that the Petition will not be reviewed by Court staff until the necessary information has been accepted into the e-filing system. The Petitioner ☐ / Attorney ☐ further acknowledges that a hearing may be required to process the Petition.

Petitioner's signature: _____

Signed on: _____, 20_____

OR

Attorney's signature: _____

Signed on: _____, 20_____

CERTIFICATION B:

The undersigned Petitioner ☐ (print name) _____ / Attorney ☐ (print name) _____ certifies that he/she has reviewed the information necessary to support the Petition for Formal Administration of Intestate Estate. The Petitioner ☐ / Attorney ☐ certifies that, after a diligent search and reasonable effort, the Petitioner ☐ / Attorney ☐ was unable to submit the following information for the following reasons:

_____

_____

_____

_____

_____

_____

_____.

The Petitioner ☐ / Attorney ☐ acknowledges that a hearing may be required concerning the deficiency.

Petitioner's signature: _____

Signed on: _____, 20_____

OR

Attorney's signature: _____

Signed on: _____, 20_____