

Affidavit of Heirship

Print Legibly or Type

Part 1 Decedent

Name	Owner Number	
Residence	Age at Death	Date of Death

Part 2 Will / Probate

Did decedent leave a will? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, has the will been admitted to probate? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Part 3 Estate Administration

Has someone been appointed to administer the Estate?
 Yes No

If yes, give name and address.

County/Parish and State in which administration proceedings are pending or are completed.

To your knowledge, are there any debts still owed by the decedent's estate?
 Yes No

If so, will the decedent's personal estate be sufficient, in your opinion, to pay such debts?
 Yes No

Part 4 Marital History of Decedent (If never married, please state that below.)

Name(s) & address(es) of spouse(s)	Marriage Dates		Marriage Ended By	Marriage Ended On
	From	To		
			<input type="checkbox"/> Death <input type="checkbox"/> Divorce	
			<input type="checkbox"/> Death <input type="checkbox"/> Divorce	
			<input type="checkbox"/> Death <input type="checkbox"/> Divorce	

Part 5 Information for All Children of the Decedent (Including Legally Adopted Children) (If there are none, please state that below.)

Child's Name	Date of Birth	Date of Death	Mailing Address

Part 6 Information for Descendants of Any Deceased Child (Whether Natural or Adopted)
(If there are none, please state that below.)

Name of Deceased Child	Descendants Name and Address	Date of Birth	State if Living or Deceased	Date of Death
			<input type="checkbox"/> Living <input type="checkbox"/> Deceased	
			<input type="checkbox"/> Living <input type="checkbox"/> Deceased	
			<input type="checkbox"/> Living <input type="checkbox"/> Deceased	

Part 7 Information for Parents, Grandparents, Brothers, and Sisters If Decedent Had No Children or Living Spouse

Name	Relationship to Decedent	Date of Death	Mailing Address	Parent's Names

I, _____, of lawful age, being first duly sworn, upon my oath depose and say: That I am familiar with the family of the presently named decedent and was personally well acquainted with the decedent during his/her lifetime, having known him/her for _____ years, and that I bear the relationship of _____ . I further represent that the above statements and information given are based upon my personal knowledge and are true and correct.

Signed this _____ day of _____, _____ .

Signature of Affiant	Mailing Address of Affiant
	Phone Number of Affiant

State of _____
County/Parish of _____

Sworn to and subscribed to before me on _____ by _____ .

Signature of Notarial Officer	Title (and Rank)
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Seal	My commission expires
	_____ day of _____, _____ .