Docket No.: _____

State of New Jersey
Essex County Surrogate's Court

ALTURRICK KENNEY
SURROGATE

495 Dr. Martin Luther King Jr Blvd
Newark, New Jersey 07102
Phone 973-621-4900
Fax 973-621-2647

DEVERO MCDOUGAL
DEPUTY SURROGATE

In the Matter of the Estate of

_____, Deceased

AKA:_____

Notice of Intent to Make Application in the Essex County Surrogate's Court
(Used for Persons Living Outside of New Jersey)

TO: (Name)_____

(Street Address) _____

(City, State, Zip Code) _____

YOU ARE HEREBY GIVEN AT LEAST 60 DAYS NOTICE, BY REGULAR MAIL AND CERTIFIED MAIL, RETURN RECEIPT REQUESTED,

that as to the estate of _____, deceased, who died on _____/_____/_____ a resident of the County of Essex, State of New Jersey:

On the ____ day of _____, 20 _____, at 10:00am, I, _____, will appear and make application in the Essex County Surrogate's Court, Essex County Dr. Martin Luther King, Jr. Justice Building, 495 Dr Martin Luther King Jr Boulevard Room 212 Newark New Jersey, for *(check only one):*

___ Probate of the decedent's Will and grant of Letters Testamentary to myself or some other fit person, of the goods, chattels and credits of decedent.

___ Grant of Letters of Administration to myself or some other fit person, of the goods, chattels and credits of decedent.

___ Grant of Letters of Administration Ad Prosequendum to myself or some other fit person, of the goods, chattels and credits of decedent.

___ Issuance of an Affidavit of Next of Kin in Lieu of Administration to myself or some other fit person, of the decedent's real and personal assets, which do not exceed: $20,000.00(decedent on or after Nov 9,2015) $10,000.00(decedent died before Nov 9,2015)

If you have concerns or wish to be heard, you must appear on said date and time. You should bring this Notice with you to Surrogate's Court.

Dated: _____ _____

Signature

Docket No.: _____

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DEVERO MCDOUGAL
DEPUTY SURROGATE

In the Matter of the Estate of

_____, Deceased

AKA:_____

Certification and Proof of Mailing of Notice of Intent to Make Application in the Essex County Surrogate's Court

I,_____, residing at _____

In the city/town of _____and State of_____

1. On _____, 20___, I forwarded the attached Notice(s) of Intent to make application to all next of kin and to all beneficiaries named in the Will (if decedent had a Will)
2. I forwarded the notice(s) by both regular mail and certified mail, return receipt requested to the following parties (list name and address of each party)

Name(s)_____ Address(s)_____

3. Proof of mailing of the certified mail is attached via copy of the signed return receipt or, if the same has not yet been, returned, a printout of tracking information from the U.S. Postal Service showing delivery/attempted delivery to the party and his/address listed in my notice(s)
I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are true willfully false, I am subject to punishment.

Dated:_____ Signature:_____