

# Gloucester County Surrogate Court

## Estate Information Form

### Surrogate Giuseppe Chila

Phone:(856) 853-3282 \* 17 North Broad Street Woodbury N.J. 08096 \* Fax: (856) 853-3311

Probate  Administration  Affidavit of Surviving Spouse  Affidavit of Next of Kin

#### Decedent Information

Name: \_\_\_\_\_

AKA: \_\_\_\_\_

Address: \_\_\_\_\_

Municipality: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Social Security # \_\_\_\_\_

#### Will / Codicil Information

Date of Will: \_\_\_\_\_ Number of Pages: \_\_\_\_\_ Self Proving (Is Will Notarized)

Date of Codicil: \_\_\_\_\_ Number of Pages: \_\_\_\_\_ YES NO

Name of Estate Attorney: \_\_\_\_\_

Name of Trustee: \_\_\_\_\_

Address of Trustee: \_\_\_\_\_

Name of Trust Beneficiary: \_\_\_\_\_ Age: \_\_\_\_\_

#### Personal Representative Information (Executor/Administrator)

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Total Number of Short Certificates Requested: \_\_\_\_\_

## Type of Assets in Decedents Name Only

Real Estate: YES NO

Out of State Real Estate: YES NO

Vehicle  Bank Account  Brokerage Account  Stock  Motorcycle  Boat  RV

**For Affidavit of Surviving Spouse or Next of Kin list Year Make and Model any Titled Property**

\_\_\_\_\_  
\_\_\_\_\_

## List All Named Beneficiaries and All Next of Kin

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age if minor: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age if minor: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age if minor: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age if minor: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age if minor: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age if minor: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age if minor: \_\_\_\_\_

I attest that the information provided is the true and accurate to the best of my knowledge.

Signature: \_\_\_\_\_ Print: \_\_\_\_\_ Date: \_\_\_\_\_