## **ESTATE WORKSHEET**

determine what type of estate proceeding is necessary.
Notice: This is the only worksheet. If there is not enough space on this worksheet for your information, attach a standard 8 ½ x 11 sheets of paper to this worksheet. Completed in <b>BLACK</b> INK. Do not use pencil. Please call our office at 843-479-5610 if you have any questions about completing this worksheet.
**Please bring an original death certificate, a full obituary, and paid funeral when you come for your appointment along with this worksheet**
DECEDENT'S NAME:
DECEDENT'S DATE OF DEATH:
YOUR NAME:
YOUR ADDRESS:
YOUR DAYTIME TELEPHONE NUMBER:
YOUR RELATIONSHIP TO DECEDENT:
Did the Decedent have a will?
If the person named as the Primary Personal Representative is deceased, is there a Secondary and/or Alternate Personal Representative named in the Will?
If different from the person completing this form, please list his/her name, address and phone number:
To the best of your knowledge, was the Decedent a patient in a South Carolina Mental Health facility during his/her lifetime:
Where was the Decedent living at the time of death? (Check below.)
☐ Apartment
□ Nursing Home
☐ Own home or condominium
☐ Prison/Jail
Other (if other, please explain:

Is the Decedent's name on the title to this property?  $\ \square$  Yes  $\ \square$  No

On the next page list ALL property owned by the Decedent at the time of his/her death and state the value at the time of death. The instructions below indicate what type of information is required to be listed. If you do not have enough space on the worksheet for your information, please attach a standard 8 ½ x 11 sheets of paper for your additional information.

Real Estate — Give the location (Street/City/County/State). If there is a mobile home on the property, list I separately. If the real estate is joint with right of survivorship, you are not required to list it on this worksheet. In order for the real estate to be joint with right of survivorship, it must have survivorship language included in the deed. Please carefully review the language of your deed to ensure that it is joint with right of survivorship and not joint tenants in common.

<u>Stocks and Bonds</u> – For stocks, list the name of stock, the number of shares and the value. For bonds, list the denomination, the series, and the value. If the stocks and bonds are joint with right of survivorship, not tenants in common, you are not required to list it on this worksheet. **Please carefully review the language on your stocks and bond to ensure that it is joint with right of survivorship.** 

<u>Bank Accounts</u> – Please list the name of the financial institution and the type of account. <u>Do not list account numbers on this worksheet.</u> If the accounts are joint with right of survivorship, you are not required to list them on the worksheet. If you are uncertain that he accounts are joint with right of survivorship, please verify the information with your financial institution. For the bank accounts that are in just the decedent's name alone or for accounts that re joint but without right of survivorship, you will need to list the value for each individual account as of the date of death.

<u>Check or refunds made payable to the decedent or his/her estate</u> – include the payor's name and check number and the amount.

**Life Insurance policies owned by the decedent and payable to the decedent's estate** – list the insurance company's name and the amount of the policy.

**Vehicles or mobile homes** - list the year, made and model and vehicle identification number (VIN #). If the vehicles are in just the decedent's name along, list them accordingly. If they are joint with another person, list the joint owner and specify that they are titled "and." If the decedent owned any vehicles that are titled "or," you are not required to list them on this worksheet. You may wish to obtain a statement from a dealer regarding the value of any vehicles, mobile homes or boats. **Also include the value of the household furniture, furnishings and personal items.** However, if the decedent is survived by a spouse, you are not required to list it on this worksheet unless it is an exception covered in 62-2-805.

Annuities, retirement, 401-Ks or IRAs in which the estate of the decedent is the beneficiary – list the type of account, the name of the company/financial institution and the value as of the date of death.

\*If there are no assets, but you need to open the estate for litigation purposes, you need to state that there are no assets, and state what type of litigation you intend to pursue. Please provide the court with any current correspondence concerning the litigation.

<u>Unclaimed Property</u> – contact all state Treasurer's offices in which the decedent has lived to determine if the decedent has any unclaimed property to collect.

<u>Cooperatives</u> – contact all Cooperatives, i.e., Marlboro County Electric Cooperative, Horry County Telephone Cooperative (HTC), in which the decedent may have had an account in his/her name to determine if the decedent has a capital credit account to collect.

<u>Description of Property</u> :	<u>\$ Value</u>
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23.	

## LIST THE DECEDENT'S RELATIVES: (If none or deceased, please indicate and list date of death.) **Decedent's spouse:** List name, complete mailing address and year of birth: **Decedent's children** (still alive): List name, complete mailing address and year of birth: (If you need more space, please attach a sheet of paper (8 $\frac{1}{2}$ x 11) to complete this section.) **Children PREDECEASING decedent:** (If you need more space, please attach a sheet of paper (8 % x 11) to complete this section.) Name of deceased child: \_\_ List names, complete mailing addresses and years of birth for any children of this deceased child. Name of deceased child: List names, complete mailing addresses and years of birth for any children of this deceased child.

IF YOU ANSWERED "NONE" TO THE PREVIOUS QUESTIONS ABOUT RELATIVE, LIST THE DECEDENT'S PARENTS:			
Mother's Name: _		Deceased (Y/N)?	
Address:			
Father's Name:		Deceased (Y/N)?	
Address:			
LISTED ARE DECEA IF THE DECEDENT' SIBLING(S)' CHILD	ASED, PLEASE LIST THE NAME(S) AND ADI 'S SIBLING(S) ARE DECEASED, YOU WILL L (REN).	OUT RELATIVES AND BOTH PARENTS OR ALL PERSONS DRESS(ES) OF THE DECEDENT'S SIBLING(S). IST THE NAME AND ADDRESSES OF THE DECEASED ATION, PLEASE CONTACT THE PROBATE COURT AT	
with their relation	omplete mailing addresses and year of bin Inship to the decedent. Space, please attach a sheet of paper (8 ½	th of any other persons named in the decedent's will alo	ng
•	rsons listed on the worksheet under the a "Yes", write the age and date of birth ne	_	
<u>Litigation</u> You must provide the litigation.	the Court with copies of the latest corres	oondence, court filings, mediation and arbitration concerr	ing
	Type of Litigation:		
	Name of Attorney:		
	Address:		
	City, State, Zip:		
	Phone Number:		
	Fax Number:		

## FEES - you must bring with you:

Filing an application for Informal – Probate of Will and/or Appointment is \$25.00.

Filing an application for formal – Testacy and/or Appointment is \$150.00 and must be accompanied by a Summons, along with a \$25.00 estate open fee.

A NOTICE TO CREDITORS must be published in the local paper which will cost \$65.00. A receipt confirming that the Notice to Creditors has been requested for publication in the local paper must be filed with the Probate Court.

IF address(es) of known heirs is not available, a NOTICE TO HEIRS AND DEVISES will need to be published in the local paper which will cost \$185.00. A receipt confirming that the Notice to Heirs and Devisees has been requested for publication in the local paper must be filed with the Probate Court.

There will also be an additional COURT COST to be paid in the estate when filing the Inventory and Appraisement which costs will be based upon the value of the estate assets. These costs will become due at filing or within thirty (30) days of filing the filing date.

PLEASE CALL OUR OFFICE FOR AN APPOINTMENT TO OPEN AN ESTATE FOR YOUR LOVED ONE <u>AFTER</u> YOU HAVE COMPLETED THIS WORKSHEET AND HAVE THE FOLLOWING DOCUMENTS IN YOUR POSSESSTION:

- Full Obituary
- Funeral Bill marked paid and by whom paid
- A Certified copy of the Death Certificate
- Original Will, Codicil and Written Memorandums
- If there is real estate in the decedent's name, please go to the Tax Assessor's office (also located in the Courthouse) and ask for a copy of the Tax Card for any and all properties owned by the decedent. Once you have a copy of this information, please go to the Clerk of Court's office (also located in the Courthouse) to obtain a copy of the latest deed for the property(ies).

Please note that no appointment scheduled after 4:00 pm. Please be prepared to allow about 45 minutes or more for our staff to assist you in opening an estate.

RENEKA McCOY
PROBATE JUDGE
MARLBORO COUNTY COURTHOUSE (105 Main St.)
P. O. BOX 455
BENNETTSVILLE, SC 29512

TELEPHONE: 843-479-5610/FAX: 843-479-5668

EMAIL: mcprobate@gmail.com

WEBSITE: https://www.sccourts.org/probate/index.cfm?countyno=34