

SMALL ESTATE AFFIDAVIT

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**For Transfer of Property
When a Person has Died**

FORMS and INSTRUCTIONS

SELF-SERVICE CENTER

SMALL ESTATE AFFIDAVIT(S) FOR TRANSFER
(A.R.S. § 14-3971)

FOR TRANSFER OF PROPERTY WHEN PERSON HAS DIED

You may use the forms and instructions in this packet if . . .

- ✓ **The value of all of the *personal property*** (cash, bank accounts, stocks and bonds, cars, jewelry, money owed to the person who died, etc.) in the estate of the person who died (the “deceased”), wherever that property is located, less liens and encumbrances, **does not exceed \$75,000**, and **at least 30 days have passed since the death, and/or**
- ✓ **The assessed value of the *real property*** (land and permanent structures on the land) in the deceased’s estate located in Arizona, less liens and encumbrances as of the date of the deceased’s death, **does not exceed \$100,000**, and **at least 6 months have passed since the death, and/or**
- ✓ **You are the surviving spouse, and you want to collect up to \$5000 in wages owed to the deceased, and/or**
- ✓ **You are entitled to the real property and/or personal property, and have the legal right (“legal standing”) to submit an affidavit claiming the property because:**
 - **You are named in a will** to receive the property and you can prove it; **OR**
 - **The person who died *did not* have a will, but you are related to the decedent as:**
 1. **Surviving Spouse, or**
 2. **Child** , *if there is no surviving spouse – or there is, but he or she is not your parent and your parent, the decedent, had separate or community property, or*
 3. **Parent**, *if there is no surviving spouse or child, or*
 4. **Brother or Sister**, *if there is no surviving spouse or child or parent, AND*
 - **If there are people with equal or greater right than you to the property, they have all assigned their entire interests in the estate to you**, which is proven by the copy of the documents they signed to this effect that you can attach to the affidavit.

READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Self-Service Center website.

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____
Licensed Fiduciary Number: _____

For Clerk's Use Only

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

AFFIDAVIT FOR COLLECTION OF ALL PERSONAL PROPERTY

STATE OF ARIZONA)
MARICOPA COUNTY)

By signing this affidavit, I swear or affirm under penalty of perjury that its contents are true and correct.

1. INFORMATION ABOUT THE DECEASED (THE PERSON WHO DIED):

Name of person who died: _____

Date of death: _____

Place of death: _____

2. 30-DAY REQUIREMENT: More than thirty (30) days have gone by since the person died.

3. RELATIONSHIP: My relationship to the person who died is: (explain) _____

4. VALUE OF PERSONAL PROPERTY. The value of all the personal property in the deceased person's estate, wherever located, minus the amount of liens and encumbrances on the property, is not greater than \$75,000.00.

5. PERSONAL REPRESENTATIVE. To the best of my knowledge, no one has filed an Application or Petition for Appointment of a Personal Representative and no Application or Petition has been granted in any state OR if an application has been granted the personal representative has been discharged or more than one year has elapsed since a closing statement has been filed and the amount does not exceed \$75,000.00.

6. ENTITLEMENT. I am the claiming successor to the personal property and I am entitled to payment or delivery of the property because I am. (Check all boxes that apply.)

- I am named in the Will of the person who died, a copy of which is attached to this Affidavit.
- The deceased had no Will, but I am entitled to the property under law because (check ONE)
 - I am the spouse of the person who died;
 - I am a child of the person who died, and there is no surviving spouse, or there is a surviving spouse but he or she is not my parent and the deceased had separate or community property;
 - I am the parent of the person who died, and there is no surviving spouse or child;
 - I am a brother or sister of the person who died, and there is no surviving spouse, child or parent.
 - The person died without a will and I am the sole heir.
- The person died without a will and the people with equal or greater right than I have to the property have all assigned their entire interests in the estate to me, which is proven by the copy of the documents they signed to this effect that I am attaching to this affidavit.
- The person died and left a valid Will and the people with equal or greater right than I have to the property have all assigned their entire interests in the estate to me, which is proven by the copy of the documents they signed to this effect that I am attaching to this affidavit.

7. DESCRIPTION OF PROPERTY. The person who died owned the following personal property. (List all property. Attach extra pages if necessary.)

Description	Value	Location, or Who Has Property Now
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

TOTAL VALUE: \$ _____

8. **MONEY OWED:** The person who died was entitled to collect on the following debts from persons located in Arizona. (List all. Attach extra pages if necessary.)

Description	Amount owed	Name of Who Owes the Debt
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

TOTAL AMOUNT OWED: \$ _____

9. This affidavit is made under Arizona Law, Sec. 14-3971(B), Arizona Revised Statutes, for the purpose of making claim to personal property of the person who died.

OATH OR AFFIRMATION

The contents of this document are true and correct under penalty of perjury.

Signature of Person Making Affidavit _____ Date

Printed Name

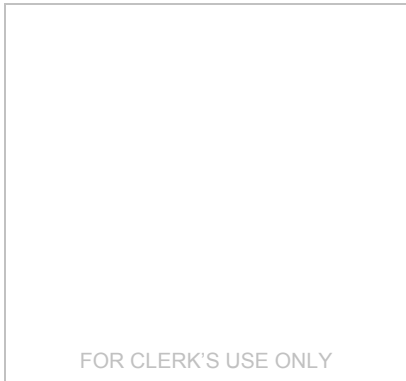
Sworn to or Affirmed before me this date: _____ Date

(Seal/My Commission Expires) _____

Deputy Clerk of Court or Notary Public

**SUPERIOR COURT OF
ARIZONA IN GRAHAM COUNTY**

PROBATE INFORMATION COVER SHEET



Case Number: PB _____

A person needing a guardian or conservator is the "ward". A person who died is the "decedent".

INFORMATION ABOUT THE WARD or THE DECEDENT

NAME: _____	DATE OF BIRTH: _____
MAILING ADDRESS : _____	
STREET ADDRESS (if different): _____	
TELEPHONE (Home): _____	SSN: _____
TELEPHONE (Cellular): _____	EMAIL: _____
<input type="checkbox"/> ADDITIONAL WARDS ARE INVOLVED. Information listed separately.	

INFORMATION ABOUT THE PETITIONER, the person filing these papers.

NAME: _____	
MAILING ADDRESS: _____	
TELEPHONE: _____	EMAIL: _____
INFORMATION ABOUT PETITIONER'S ATTORNEY: <input type="checkbox"/> Petitioner is not represented by an attorney, or	
NAME: _____	BAR # _____
TELEPHONE: _____	EMAIL: _____

An INTERPRETER IS NEEDED for this language: _____ By _____

(List Names of) Persons who need interpreter: Name: _____

Name: _____ Name: _____

STAFF USE ONLY: REASON FEES NOT PAID: Government Charge Deferred

NATURE OF ACTION: Place an "X" next to number which describes the nature of the case. Check only **ONE**.

- | | |
|--|--|
| <p>200 ESTATE</p> <p>____ 201 Formal Appointment of Personal Representative</p> <p>____ 202 Informal Appointment of Personal Representative</p> <p>____ 203 Ancillary Administration</p> <p>____ 204 Affidavit of Succession to Realty</p> <p>____ 205 Trust Administration</p> <p>____ 206 Formal Probate of Will</p> <p>____ 207 Informal Probate of Will</p> <p>____ 208 Proof of Authority</p> <p>____ 210 Other _____</p> <p style="padding-left: 100px;">Specify</p> <p>____ 211 Single Transaction/Limited Conservatorship</p> <p>____ 212 Foreign Domiciliary</p> | <p>220 CONSERVATOR</p> <p>____ 221 Minor</p> <p>____ 222 Adult Incapacitated Person</p> <p>230 GUARDIANSHIP</p> <p>____ 231 Minor</p> <p>____ 232 Adult (including those with Dementia, Alzheimer's)</p> <p>____ 233 Adult Requiring In-Hospital Mental Health Treatment</p> <p>240 GUARDIANSHIP-CONSERVATOR COMBINATION</p> <p>____ 241 Minor</p> <p>____ 242 Adult (including those with Dementia, Alzheimer's)</p> <p>____ 243 Adult Requiring In-Hospital Mental Health Treatment</p> |
|--|--|

Case No. _____

INFORMATION ABOUT THE FIDUCIARY, the person to serve as guardian, conservator, or personal representative (executor) of the Estate of someone who died.

NAME: _____		DATE OF BIRTH: _____	
MAILING ADDRESS: _____			
STREET ADDRESS: (if different) _____			
TELEPHONE (Home): _____		SSN: _____	
TELEPHONE (Cellular): _____		EMAIL: _____	
TELEPHONE (Work): _____		CERTIFICATION # _____ (for State-Licensed Fiduciaries ONLY)	
RELATIONSHIP TO THE WARD OR (if an estate matter) THE DECEDENT: _____			
PHYSICAL DESCRIPTION:	RACE:	HEIGHT	WEIGHT:
	EYE COLOR:	HAIR COLOR:	

By signing below, I state to the Court under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Petitioner or Attorney Signature

<h2>NOTICE</h2> <p style="text-align: center;">SUBMIT THIS FORM WITH NEW CASES ONLY.</p> <p style="text-align: center;">If there is already a (Maricopa County) Probate Court case number and you are filing in an existing Superior Court case in Maricopa County, DO NOT SUBMIT THIS FORM.</p>

Person Filing: _____
 Address (if not protected): _____
 City, State, Zip Code: _____
 Telephone: _____
 Email Address: _____
 Lawyer's Bar Number: _____
 Licensed Fiduciary Number: _____

FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

In the Matter of the Estate of: _____

Case Number: _____

AFFIDAVIT for TRANSFER of TITLE to REAL PROPERTY

an Adult a Minor, deceased

STATE OF ARIZONA)
 COUNTY OF MARICOPA) ss.

By signing this affidavit, I we swear or affirm under penalty of perjury that its contents are true and correct.

1. INFORMATION ABOUT PERSON WHO DIED (the deceased).

The deceased, _____, died on _____

(name) (date)

2. PLACE OF DEATH. (Check one box)

- At the time of death, the person who died was living in Maricopa County in Arizona, **OR**
- At the time of death, the person who died was **not** living in Maricopa County, but was living at:

_____ (city and state) and owned real property located in Maricopa County in Arizona.

3. RELATIONSHIP. This is my our relationship to the person who died: (explain)

4. **DESCRIPTION OF REAL PROPERTY.** The legal description as written on the deed of title of the real property is: _____

5. **INTEREST OF PERSON WHO DIED IN PROPERTY.** The interest of the person who died in the real property is (list how the decedent held title to the property or other interest in the property).

6. **VALUE OF ESTATE.** The assessed value in the estate of the person who died of all real property located in this state, including any debt secured by a lien on real property, less liens and encumbrances against the real property as of the date of the death, does not exceed \$100,000.00.

7. **SIX MONTH REQUIREMENT.** Six months have elapsed since the death, as shown in a certified copy of the death certificate attached to this affidavit.

8. **PERSONAL REPRESENTATIVE.** An application or petition for appointment of a personal representative is not pending or has not been granted in any jurisdiction OR an application has been granted but the personal representative has been discharged or more than one year has elapsed since a closing statement has been filed and the \$100,000 limit on the value of the property has not been exceeded.

9. **FUNERAL EXPENSES.** Funeral expenses, expenses of last illness, and all unsecured debts of the person who died have been paid.

10. **REASON WHY I AM WE ARE ENTITLED TO THE PROPERTY.** The persons signing this affidavit are entitled to the real property because (check the boxes that apply):

I am the spouse of the deceased and I am claiming the allowance in lieu of homestead (\$18,000) exempt property (\$7,000) and family allowance (\$12,000). (A.R.S. §§ 14-2401 through 14-2405)

There is no surviving spouse and I am the dependent or minor child of the person who died. I am claiming the allowance in lieu of homestead (\$18,000) exempt property (\$7,000), and family allowance (reasonable allowance for maintenance of family during administration of estate, generally up to one year). (A.R.S. 14-2401-03). All other dependent children of my deceased parent with equal or greater right than I have to the property, have all assigned their entire interests in the estate to me, which is proven by the copy of the document they signed to this effect that I am attaching to this affidavit or they have signed this affidavit indicating their interest in the property.

There is no surviving spouse and we are the dependents or minor children of the person who died. We are claiming the allowance in lieu of homestead (\$18,000) exempt property (\$7,000), and family allowance (reasonable allowance for maintenance of family during administration of estate, generally up to one year). (A.R.S. 14-2401-03).

I am We are named in the will dated _____ of the person who died, the original of which is attached to this affidavit, or a certified copy of the Will which has been probated as follows (name of court and case number) _____.

- The person who died had no will, and I am** entitled to the property by law because (check one box)
- I am the spouse of the person who died;
- I am a child of the person, who died, and there is no surviving spouse, or there is a surviving spouse but he or she is not my parent and the deceased had separate or community property;
- I am the parent of the person who died, and there is no surviving child, spouse or parent;
- I am a brother or sister of the person who died, and there is no surviving spouse, child or parent.
- The person who died had no will, and we are** entitled to the property by law because (check one box)
- We are children of the person who died, and there is no surviving spouse, or there is a surviving spouse but he or she is not our parent and the deceased had separate or community property;
- We are a brother(s) and/or sister(s) of the person who died, and there is no surviving spouse, child, or parent.
- The person died without a will and I am** I am We are the sole heir(s).
- The person died without a will and the people with equal or greater right than I** have to the property have assigned their entire interests in the estate to me, which is proven by the copy of the documents they signed to this effect that I am attaching to this affidavit or have signed this affidavit indicating their interest in the property.
- The person died without a will and the people with equal or greater right than we have** to the property have assigned their entire interests in the estate to all of us. This assignment is proven by the copy(ies) of the signed documents, which we attached to this affidavit, or have signed this affidavit indicating their interest in the property.
- The person died and left a valid will giving the entire estate to me/us.**
- The person died and left a valid will**, and the people with equal or greater right than I have to the property **assigned their entire interest in the estate to me.** This assignment is proven either by the copy of the signed document attached to this affidavit or I signed this affidavit indicating their interest in the property.
- The person died and left a valid will**, and the people with equal or greater right than we have to the property **assigned their entire interest in the estate to us.** This assignment is proven by the copy of the document(s) attached to this affidavit or we have signed this affidavit indicating their interest in the property.

11. OTHER PERSONS. No other person has a right to the interest of the decedent in the described property.

12. TAXES. No federal or Arizona estate tax is due on the person who died estate.

OATH OR AFFIRMATION.

- I certify under penalty of perjury that the contents of this affidavit are true and correct.**

Signature of Person Making Affidavit Printed Name of Person Date

Signed and Sworn or Affirmed before me this date:
(Seal/My Commission Expires) _____

Deputy Clerk or Notary Public

(If more than 1 beneficiary/transferee, please sign below)

- I certify under penalty of perjury that the contents of this affidavit are true and correct.**

Signature of Person Making Affidavit Printed Name of Person Date

Signed and Sworn or Affirmed before me this date:
(Seal/My Commission Expires) _____

Deputy Clerk or Notary Public

- I certify under penalty of perjury that the contents of this affidavit are true and correct.**

Signature of Person Making Affidavit Printed Name of Person Date

Signed and Sworn or Affirmed before me this date:
(Seal/My Commission Expires) _____

Deputy Clerk or Notary Public

- I certify under penalty of perjury that the contents of this affidavit are true and correct.**

Signature of Person Making Affidavit Printed Name of Person Date

Signed and Sworn or Affirmed before me this date:
(Seal/My Commission Expires) _____

Deputy Clerk or Notary Public

SELF-SERVICE CENTER

SMALL ESTATE AFFIDAVIT(S) OF TRANSFER

(instead of Probate)

PROCEDURES: WHAT TO DO AFTER YOU HAVE COMPLETED THE AFFIDAVIT:

1. **To collect PERSONAL PROPERTY:** Take the “**Affidavit for Collection of All Personal Property**” to the person who has the personal property (cash, bank accounts, stocks and bonds, cars, jewelry, etc.) of the person who died. If you are claiming title to a motor vehicle, the motor vehicle division will transfer title to you upon payment of any required fees.

You may also present the **Affidavit** to collect a debt owed to the person who died. If you are the surviving spouse, you may *also* use the **Affidavit** to collect wages owed to the decedent, of up to \$5000.

It is not necessary to file any papers or pay any fees to the Court to use the **Affidavit to Collect Personal Property**.

2. **To claim an interest in REAL PROPERTY:** Take the following documents to the Probate Registrar at any of the Superior Court locations listed. Note that there will be a fee to file for this process. A list of current fees is available from the Self Service Center and from the Clerk of Court’s website.

- Original Probate Cover sheet. (Mark #204 for “Affidavit of Succession to Realty”).
- Original “**Affidavit for Transfer of Real Property Title**”. If the estate was previously opened, write the old probate case number on the affidavit.
- Original Will if one exists or a certified copy of the Will from the court of record.
- Certified death certificate.
- Copy of the closing statement if there was a probate in a county other than Maricopa County.

File your papers with the Probate Registrar at any of the following Superior Court locations:

GRAHAM COUNTY SUPERIOR COURT
800 WEST MAIN STREET
SAFFORD, ARIZONA 85546

File the original **Affidavit for Transfer of Real Property Title** and the original will. If the Probate Registrar determines that your **Affidavit** is complete, the Probate Registrar will issue a certified copy of the affidavit.

You must then record the certified copy with the county recorder in the county where the real property is located.