SMALL ESTATE AFFIDAVIT



For Transfer of Property When a Person has Died

FORMS and INSTRUCTIONS

ALL RIGHTS RESERVED PBSE1 – 5280 - 082515

SELF-SERVICE CENTER

SMALL ESTATE AFFIDAVIT OF TRANSFER

This packet contains court forms and instructions to file a small estate affidavit of transfer. Items in **BOLD** are forms that you will need to file with the Court. Non-bold items are instructions or procedures. Do not copy or file those pages!

| Order | File No. | Title | # pages |
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SELF-SERVICE CENTER

SMALL ESTATE AFFIDAVIT(S) FOR TRANSFER

(A.R.S. § 14-3971)

FOR TRANSFER OF PROPERTY WHEN PERSON HAS DIED

- ✓ 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.

| Perso | on Filing: | |
|---------------|---|------------------------------|
| Addre | ess (if not protected): | |
| | State, Zip Code: | |
| - | hone: | |
| Email | Address: | |
| | er's Bar Number: | For Clerk's Use Only |
| Licen | sed Fiduciary Number: | Tor oronk a dod offing |
| Repre | esenting Self, without a Lawyer or Attorney for Petitioner OR | Respondent |
| | AFFIDAVIT FOR COLLECTION C ALL PERSONAL PROPERTY |)F |
| STAT | TE OF ARIZONA) COUNTY) | |
| By s corre | igning this affidavit, I swear or affirm under penalty of perjury tha | at its contents are true and |
| 1. | INFORMATION ABOUT THE DECEASED (THE PERSON WI | HO DIED): |
| | Name of person who died: | |
| | Date of death: | |
| | Place of death: | |
| 2. | 30-DAY REQUIREMENT: More than thirty (30) days have gone by sir | nce the person died. |
| 3. | RELATIONSHIP: My relationship to the person who died is: (explain) _ | |
| 4. | VALUE OF PERSONAL PROPERTY. The value of all the person's estate wherever located minus the amount of liens and encum | |

- person's estate, wherever located, minus the amount of liens and encumbrances on the property, is not greater than \$75,000.00.
- **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.

| | | | iming successor to the pam. (Check all boxes the | ersonal property and I am entitled to payment of at apply.) |
|---------|-------|--|--|--|
| | I am | named in the Will of | the person who died, a | copy of which is attached to this Affidavit. |
| | The o | deceased had no Wi | ill, but I am entitled to the | property under law because (check ONE) |
| | | I am the spouse | of the person who died; | |
| | | | - | nere is no surviving spouse, or there is a surviving and the deceased had separate or community |
| | | I am the parent o | of the person who died, a | nd there is no surviving spouse or child; |
| | | I am a brother or parent. | sister of the person who | o died, and there is no surviving spouse, child o |
| | | The person died | without a will and I am th | e sole heir. |
| | have | all assigned their e | | equal or greater right than I have to the property tate to me, which is proven by the copy of the other ching to this affidavit. |
| | prope | erty have all assigne | d their entire interests in | ple with equal or greater right than I have to the the estate to me, which is proven by the copy o attaching to this affidavit. |
| all pro | | TION OF PROPE attach extra pages if | • | died owned the following personal property. (Lis Location, or Who Has Property Now |
| | • | | | , , , |
| | | | \$ | |
| | | | \$ | |
| | | | | |
| | | | \$ | |
| | | | \$ \$ | |

| | Description | Amount owed | Name of Who Owes the Debt |
|-------------------------|--|--------------------------|--|
| | | \$ | |
| | | | - |
| | | \$ | - |
| | | \$ | |
| | TOTAL AMOUNT OWED: \$ | | |
| 9. | This affidavit is made under Arizona I making claim to personal property of the | | Arizona Revised Statutes, for the purpose |
| | | ie person who died. | |
| OA [.] | | · | are true and correct under penalty of perjury. |
| OA [·] | | · | are true and correct under penalty of perjury. |
| | | · | are true and correct under penalty of perjury. Date |
| Signa | TH OR AFFIRMATION: The con | tents of this document a | |
| Signa | TH OR AFFIRMATION: The conditional state of Person Making Affidavit | tents of this document a | |
| Signa Printe | TH OR AFFIRMATION: The conditional sture of Person Making Affidavit and Name | tents of this document a | |
| Signa Printe STAT | TH OR AFFIRMATION: The conditional conditions at the condition of Person Making Affidavit and Name TE OF NTY OF | tents of this document a | Date |
| Signa Printe STAT | TH OR AFFIRMATION: The conditional conditions at the condition of the cond | tents of this document a | Date |
| Signa Printe STAT | TH OR AFFIRMATION: The conditional conditions at the condition of Person Making Affidavit and Name TE OF NTY OF | e this: | Date |

SUPERIOR COURT OF ARIZONA

FOR CLERK'S USE ONLY

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 DATE OF BIRTH: NAME: MAILING ADDRESS: STREET ADDRESS (if different): TELEPHONE (Home): TELEPHONE (Cellular): EMAIL: 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:
Petitioner is not represented by an attorney, or BAR# TELEPHONE: EMAIL: An INTERPRETER IS NEEDED for this language: (List Names of) **Persons who need interpreter:** 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. 200 ESTATE **220 CONSERVATOR** ____ 221 Minor ____ 201 Formal Appointment of Personal Representative ____ 222 Adult Incapacitated Person ___ 202 Informal Appointment of Personal 230 GUARDIANSHIP Representative ____ 231 Minor __ 203 Ancillary Administration _____ 232 Adult (including those with Dementia, Alzheimer's) 204 Affidavit of Succession to Realty ____ 233 Adult Requiring In-Hospital Mental Health 205 Trust Administration Treatment 206 Formal Probate of Will 207 Informal Probate of Will 240 GUARDIANSHIP-CONSERVATOR COMBINATION ____ 208 Proof of Authority ____ 241 Minor ____ 210 Other ____ _____ 242 Adult (including those with Dementia, Alzheimer's) Specify ____243 Adult Requiring In-Hospital Mental Health 211 Single Transaction/Limited Conservatorship Treatment 212 Foreign Domicilliary

| 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 | t) | | | | |
| TELEPHONE (Home): | | SSN: | | | |
| TELEPHONE (Cellular): | DNE (Cellular): EMAIL: | | | | |
| TELEPHONE (Work): | | CERTIFIC | CATION # | | |
| | | | (for State-I | Licensed Fiduci | aries ONLY) |
| RELATIONSHIP TO THE WARD | OR (if an estate r | matter) THE DECEDENT: | | | |
| PHYSICAL DESCRIPTION: | RACE: | HEIGHT | | WEIGHT: | |
| THORAL DESCRIPTION. | 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 | |
|----------------------------------|--|

NOTICE

SUBMIT THIS FORM WITH NEW CASES ONLY.

If there is already a Probate Court case number and you are filing in an existing Superior Court **DO NOT SUBMIT THIS FORM**.

| Address City, St Teleph Email A Lawyer | s (if not protected): ate, Zip Code: one: Address: 's Bar Number: | | | FOR CLERK'S USE ONLY |
|--|---|--|-------------------------|---------------------------|
| | | awyer or Attorney for | | spondent |
| | SUPE | RIOR COURT OF | ARIZONA | |
| In the I | Matter of the Estate of: | | Case Number: | |
| | Adult | ed ss. | AFFIDAVIT for TI | |
| | ning this affidavit, I 🗌 | we ☐ swear or affirm ur | nder penalty of perju | ury that its contents are |
| 1. | INFORMATION ABO | UT PERSON WHO DIED | (the deceased). | |
| The d | eceased, | (2.20.2) | , died on | (-1-4-) |
| • | DI ACE OF DEATH | (name) | | (date) |
| 2. | | the person who died was livire person who died was not livi | • | - |
| | (city and state) ar | nd owned real property located | d in | County in Arizona. |
| 3. | RELATIONSHIP. This | s is my our relation | onship to the person wh | no died: (explain) |
| | | | | |

PBSE12f - 050115

| | SCRIPTION OF REAL PROPERTY. The <u>legal description</u> as written on the deed of title of the property is: |
|---------------|--|
| | |
| | EREST OF PERSON WHO DIED IN PROPERTY. The interest of the person who died in the property is (list how the decedent held title to the property or other interest in the property). |
| | |
| locat | LUE OF ESTATE. The assessed value in the estate of the person who died of all real property ted in this state, including any debt secured by a lien on real property, less liens and encumbrances the real property as of the date of the death, does not exceed \$100,000.00. |
| | MONTH REQUIREMENT. Six months have elapsed since the death, as shown in a certified of the death certificate attached to this affidavit. |
| repro gran | RSONAL REPRESENTATIVE. An application or petition for appointment of a personal esentative is not pending or has not been granted in any jurisdiction OR an application has been ted but the personal representative has been discharged or more than one year has elapsed since a ng statement has been filed and the \$100,000 limit on the value of the property has not been exceeded. |
| | NERAL EXPENSES. Funeral expenses, expenses of last illness, and all unsecured debts of the on who died have been paid. |
| | ASON WHY I AM WE ARE ENTITLED TO THE PROPERTY. The persons ng 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)

Case No.

| The pe | rson 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 pe | rson who died had no will, and we are entitled to the property by law because (check one |
| | 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 pe | rson died without a will and |
| property of the | rson died without a will and the people with equal or greater right than I have to the y have assigned their entire interests in the estate to me, which is proven by the copy documents they signed to this effect that I am attaching to this affidavit or have signed davit indicating their interest in the property. |
| the pro | erson died without a will and the people with equal or greater right than we have to perty have assigned their entire interests in the estate to all of us. This assignment is by the copy(ies) of the signed documents, which we attached to this affidavit, or have signed davit indicating their interest in the property. |
| The pe | rson died and left a valid will giving the entire estate to me/us. |
| property by the | rson died and left a valid will, and the people with equal or greater right than I have to the y assigned their entire interest in the estate to me. This assignment is proven either copy of the signed document attached to this affidavit or I signed this affidavit ng their interest in the property. |
| property copy of | rson died and left a valid will, and the people with equal or greater right than we have to the y assigned their entire interest in the estate to us. This assignment is proven by the the document(s) attached to this affidavit or we have signed this affidavit indicating their in the property. |
| | |

Case No.

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

11.

property.

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

| Case No. | |
|----------|--|
| Ouscivo. | |

OATH OR AFFIRMATION.

| | Printed Name of Person | Date |
|---|---|----------------------------|
| STATE OF | | |
| COUNTY OF | | |
| Subscribed and sworn to or affirmed be | fore me this:(date) | by |
| | <u> </u> | |
| (notary seal) | Deputy Clerk or No | tary Public |
| (If more than 1 beneficiary/transferee, p | lease sign below) erjury that the contents of this af | fidavit are true and corre |
| Signature of Person Making Affidavit | Printed Name of Person | Date |
| | | |
| STATE OF | | |
| STATE OF | | |

| Case No. | | |
|----------|--|--|
| Case No. | | |

| Signature of Person Making Affidavit | Printed Name of Person | Date |
|---|-----------------------------------|---------------------------|
| STATE OF | | |
| COUNTY OF | | |
| Subscribed and sworn to or affirmed before | re me this:(date) | by |
| | · | |
| (notary seal) | Deputy Clerk or No | otary Public |
| | | |
| | jury that the contents of this af | fidavit are true and corr |
| I certify under penalty of per Signature of Person Making Affidavit | | |
| Signature of Person Making Affidavit | Printed Name of Person | |
| Signature of Person Making Affidavit STATE OF | Printed Name of Person | |
| Signature of Person Making Affidavit STATE OF COUNTY OF | Printed Name of Person | Date |
| | Printed Name of Person | Date |
| Signature of Person Making Affidavit STATE OF COUNTY OF | Printed Name of Person | Date |

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 <u>PERSONAL PROPERTY</u>:** 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**.

- To claim an interest in <u>REAL PROPERTY</u>: 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 this County.
 - When completing the Affidavit for Collection of all Personal Property, the Clerk of Court cannot notarize this form.

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

PHOENIX: MESA:

Old Courthouse, 1st Floor 222 East Javelina Avenue 125 West Washington 1st Floor Phoenix, AZ 85003-2205 Mesa, AZ 85210-6201

,

NORTHWEST: NORTHEAST:

14264 West Tierra Buena Lane 18380 North 40th Street Surprise, AZ 85374 Phoenix, Arizona 85032

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.