

IN THE COMMON PLEAS COURT OF ALLEN COUNTY, OHIO

PROBATE DIVISION
GENERAL ESTATE CHECKLIST

*PLEASE NOTE: THIS CHECKLIST IS PROVIDED AS A GENERAL REFERENCE AND COURTESY. THIS LIST MAY NOT INCLUDE EVERY DOCUMENT NEEDED FOR THE COMPLETION OF AN ESTATE IN ALLEN COUNTY PROBATE COURT.

IF YOU SEEK ADDITIONAL INFORMATION, PLEASE CONTACT AN ATTORNEY*

Transfer of Real Estate Only/ Misc. Cases

CASE INITIATION

- ___ Death Certificate
- ___ Decedent must have been a resident of Allen County at time of death
- ___ Full legal name of decedent
- ___ Addresses including zip codes & phone numbers for Fiduciaries and Attorneys
- ___ Security deposit for costs:
- ___ Transfer of Real Estate Only \$47
- ___ Transfer of Real Estate only with Probate of Will \$92
- ___ Release of Medical Records/Open Safe Deposit Box \$50

PROBATE OF WILL (if applicable)

- ___ Form 2.0 Application to Probate Will
 - ___ Original Last Will and Testament
 - ___ Will must be signed & dated by testator and witnessed by two persons
 - ___ All forms are signed by fiduciary and/or attorney (NO digital signatures)
- ___ Form 1.0 Surviving spouse, Next of Kin, Children, Legatees and Devisees
 - ___ (All beneficiaries named in Will must be listed on Page 2 of Form 1.0)
- ___ Form 2.3 Entry Admitting Will to Probate

- ___ Surviving spouse, persons who would be entitled to inherit under R.C. Chapter 2105 if testator had died Intestate, and all legatees and devisees named in will either need to:
 - 1.) Receive Form 2.2 - Notice of Probate of Will
 - ___ (If Notice of Probate of Will was issued, copy of Notice and signed certified mail card or print out from USPS to be filed (SupR 59; CivR 73))
- AND/OR
- 2) sign Form 2.1- Waiver of Probate of Will
 - ___ (Minors age 16 & 17 cannot waive or have anyone waive for them, they MUST receive notice)

- ___ Form 2.4 Certificate of Service of Notice of Probate of Will

TRANSFER OF REAL ESTATE PROCEEDINGS

- ___ Supplemental Affirmation to Application for Certificate of Transfer
- ___ Photocopy of current deed
- ___ Verification of Value (CAV or Appraisal)

- ___ Form 12.0 Application for Certificate of Transfer
 - ___ Mark testate or intestate
 - ___ One of three boxes MUST be checked regarding payment of debts
 - ___ Box must be marked stating no administration being filed or contemplated
 - ___ One box must be marked to determine what transfer is pursuant to

- ___ Form 12.1 Certificate of Transfer
 - ___ Testate or intestate box/ applicable paragraphs must be completed

RELEASE OF MEDICAL RECORDS

- ___ Form 29.0 Application to Release Medical Records and Medical Billing Records
- ___ Form 1.0 Surviving spouse, Next of Kin, Children, Legatees and Devisees
- ___ Form 29.3 Notice of Application to Release Medical Records and Medical Billing Records
- ___ Form 29.4 Waiver of Notice/Consent
- ___ Form 29.1 Entry Authorizing Release of Medical Records and Medical Billing Records
- ___ Form 29.2 Report on Receipt of Medical Records and Medical Billing Records

OPEN SAFETY DEPOSIT BOX

- ___ Application for Appointment of a Commissioner to Report on the Contents of a Safe Deposit Box
- ___ Form 1.0 Surviving spouse, Next of Kin, Children, Legatees and Devisees
- ___ Consents from Next of Kin preferred, but not required (per Judge 8/24/23)
- ___ Report on Contents of Safe Deposit Box