

# STATE OF MAINE

\_\_\_\_\_ COUNTY PROBATE COURT

DOCKET NO. \_\_\_\_\_

Estate of \_\_\_\_\_  
Decedent

APPLICATION FOR INFORMAL  
APPOINTMENT OF SPECIAL  
ADMINISTRATOR<sup>1</sup>

1. Full legal name of Applicant:

2. Address and telephone number of Applicant:

3. Legal Interest of Applicant in Estate (check all that apply):<sup>2</sup>

- Personal Representative named in the Will
- Surviving spouse
- Domestic partner
- Devisee
- Heir
- Creditor
- Other \_\_\_\_\_

4. Full legal name of Decedent:

5. Date of Decedent's death:

6. Domicile of Decedent at date of death (i.e. address of permanent residence):

7. Was Decedent domiciled in this county at date of death?  YES  NO If not, venue is based on the following.<sup>3</sup>

8. Name and address of person whose appointment is sought. (Designate mailing and legal addresses if they are different.)

9a. Did Decedent leave a Will that has been, or will be, presented for probate?  YES  NO.

9b. If you answered "yes" to question 9a above, is the person whose appointment is sought nominated as Personal Representative in the Will?  YES  NO. If not, explain why not.

10. A bond is required and is attached.<sup>4</sup>

To protect this Estate prior to the appointment of a general personal representative or following termination of a prior appointment of a general personal representative, it is necessary to appoint a special administrator.

Wherefore, Applicant requests that the person named in item 8 be informally appointed as Special Administrator of this Estate.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Applicant

Attorney for Applicant, if any:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Maine Bar Number

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

Before me, this day, personally appeared \_\_\_\_\_, known to me to be the Applicant in the foregoing application, who stated the foregoing facts under penalty of perjury and acknowledged the genuineness of the signature affixed to the application and that it was affixed as the free act and deed of the Applicant.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Register of Probate/Attorney at Law

\_\_\_\_\_  
Type or Print Name of Officer Taking Oath

## ACCEPTANCE OF APPOINTMENT

I, the undersigned, accept this position of official trust and personal liability for any violation of that trust and submit to the personal jurisdiction of this court.

Dated \_\_\_\_\_

\_\_\_\_\_  
Special Administrator

## APPOINTMENT

I hereby appoint \_\_\_\_\_ to be Special Administrator of the Estate of \_\_\_\_\_, deceased, subject to such individual's acceptance and filing of any required bond. The Special Administrator shall have all the powers and duties set forth in 18-C M.R.S. § 3-616.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Register of Probate

\_\_\_\_\_  
<sup>1</sup> 18-C M.R.S. § 3-614(1) *et seq.*

<sup>2</sup> 18-C M.R.S. § 1-201(26).

<sup>3</sup> 18-C M.R.S. § 3-201.

<sup>4</sup> 18-C M.R.S. § 3-603 *et seq.*