

STATE OF MAINE

_____ COUNTY PROBATE COURT DOCKET NO. _____

In Re: _____
(Decedent, Minor or Respondent)

WAIVER OF NOTICE¹

I, _____
(Type or Print Name)

of _____
(Mailing Address)

am above the age of 18 years and am not under any legal disability which would prevent my execution of this waiver.

I am aware that I have or may have an interest in a proceeding to which this waiver relates and that I may have a legal right to participate in hearings relating to this matter and to have notice of all such hearings, as well as all relevant filings and orders given to me.

(Check General or Limited Waiver. IF NEITHER IS CHECKED, THIS IS A GENERAL WAIVER.)

General waiver:

I hereby revoke any previous demand for notice I may have filed and waive all rights to further notice of any proceedings, hearings, filings, orders or any other matters related to this estate until I may revoke this waiver in a writing filed with the court. I do not, by this waiver, waive any right I may have to receive any benefit from this matter to which I may be, by law, entitled.

Limited waiver:

Without revoking any previous demand for notice I may have filed I waive my rights to notice with respect to the following proceedings only:

Date _____, _____.

Person Waiving Notice or his Attorney

Name, bar number, address and telephone number of attorney, if any, for person waiving notice.

¹ See 18-C M.R.S. § 1-402 and Rule 4D.