

**ASHTABULA COUNTY COURT OF COMMON PLEAS
PROBATE DIVISION
ALBERT S. CAMPLESE, JUDGE**

ESTATE OF _____, DECEASED

CASE NO. _____

APPLICATION TO REOPEN ESTATE AND APPOINT FIDUCIARY

Applicant states that the decedent died on _____, that his/her estate was administered in Ashtabula County, and that the fiduciary or Commissioner was discharged _____. on Applicant asks that the estate be reopened and that he/she be qualified as the _____ for the following reason(s):

- ☐ Newly Discovered Assets:
Nature of Asset(s): _____
- ☐ There is a wrongful death or survival action or litigation (in favor of/against) the estate pending in (specify the court, case number, and trial date): _____
- ☐ Other Claim(s):
Nature of Claim(s): _____
- ☐ Other (please specify): _____

[Check one of the following:]

- ☐ The decedent's will waives bond or bond is not required by law.
- ☐ Applicant offers the attached bond in the amount of \$_____

[For a full administration, check one of the following:]

Applicant is:

- ☐ Prior fiduciary of the estate (Completed Form 1.0, Surviving Spouse, Children, Next of Kin, Legatees and Devisees, attached)
- ☐ Alternate fiduciary named in decedent's will (Completed Form 4.0, Application for Authority to Administer Estate, attached)
- ☐ Sole beneficiary under decedent's will or sole heir at law (Completed Form 4.0, Application for Authority to Administer Estate, attached)
- ☐ A next-of-kin (Completed Form 4.0, Application for Authority to Administer Estate, attached. If there are additional next-of-kin with equal rights to serve as fiduciary, completed Form 1.0, Surviving Spouse, Children, Next of Kin, Legatees and Devisees, attached)
- ☐ Other: _____

[For releases from administration, check one of the following:]

Applicant is:

- ☐ The prior commissioner of the estate and the SAME form of release is being filed (Completed Form 1.0, Surviving Spouse, Children, Next of Kin, Legatees and Devisees, attached)
- ☐ The prior commissioner of the estate and a DIFFERENT form of release is being filed (All forms required for the new form of release, attached)
- ☐ Not the prior commissioner (All forms required for the release from administration attached—Waivers from all other next of kin or beneficiaries of the decedent's will or an additional fee to send notice is required)

Attorney for Applicant

Applicant

Typed or Printed Name

Typed or Printed Name

Address

Address

City State Zip

City State Zip

Telephone Number (include area code)

Telephone Number (include area code)

Attorney Registration No. _____