

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of _____,
Decedent

**PETITION FOR FORMAL APPOINTMENT OF
SUCCESSOR PERSONAL REPRESENTATIVE**

I, _____, state:

1. My address is: _____.

2. I am an interested person as defined by Minnesota law because I am: _____.

3. Decedent died on _____.

4. On _____, _____ was formally
appointed Personal Representative of the Estate in ☐ an unsupervised ☐ a supervised administration in
Court File No. _____ upon a petition filed by _____
_____, dated _____ (“Petition”).

5. _____, the Personal Representative:
☐ has filed a Statement to Close and more than one year has elapsed since the Statement to Close was filed.
☐ has resigned as provided by Minnesota law.
☐ died on _____.
☐ has been removed as Personal Representative by this Court.
☐ was discharged as Personal Representative on _____.
☐ other: _____.

6. A Successor Personal Representative is needed:
☐ to replace the current Personal Representative.
☐ to administer newly discovered assets.
☐ other: _____.

7. I adopt the statements in the Petition identified in Paragraph 4, above, EXCEPT AS specifically changed or
corrected as follows (if none, so state): _____

_____.

8. _____ has priority under Minnesota Statutes
section 524.3-203 for appointment as Successor Personal Representative because: _____
_____ and is willing to serve and is not disqualified.

9. The Successor Personal Representative's street address is: _____
_____.

WHEREFORE, I request this Court fix a time and place for a hearing on this Petition and enter an order formally:

1. Determining that _____ is entitled to appointment as Successor Personal Representative;
2. Appointing _____ as Successor Personal Representative of the Estate, with _____ bond, in ☐ an unsupervised ☐ a supervised administration;
3. Authorizing the issuance of appropriate letters upon qualification and acceptance; and
4. Granting such other relief as may be proper.

I declare under penalty of perjury that everything I have stated in this document is true and correct.
MINN. STAT. § 358.116.

Dated: _____

Petitioner

Attorney for Petitioner

Name _____
Firm _____
Street _____
City, State, ZIP _____
Attorney License No: _____
Telephone: _____
FAX: _____
Email: _____