

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of _____,
Decedent

LIMITED WAIVER OF NOTICE

I, _____, state:

1. My address is: _____.
2. I am an interested person as defined by Minnesota law because I am: _____.
3. I waive notice of the hearing scheduled on _____, (and any continuation of this hearing) on the Petition entitled _____ signed by _____, dated _____.

Dated: _____

Signature _____

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