STATE OF NORTH CAROLINA	A	File No.						
County	/	In The General Court Of Justice Superior Court Division Before The Clerk						
IN THE MATTER OF THE ESTAT	E OF							
Name, Street Address, City, State, And Zip Code Of Decedent		APPLICATION						
		FOR LETTERS OF ADMINISTRATION						
			FOR LETTERS OF ADMINISTRATION					
				G.S. 28A-6-1, 28A-12-4				
County Of Domicile At Time Of Death		Date Of Death	lace Of Death (if different from County Of Domicile)					
Name, Street Address, PO Box, City, State, And Zip Code Of App	plicant	Name, Street Address,	O Box, City, State, And Zip Code Of Co-Applicant					
Legal Residence (County, State)		Legal Residence (County, State)						
Name, Street Address, PO Box, City, State, And Zip Code Of Atte	orney		Attorney Bar No.					
I, the undersigned, applying for letters of administ			_					
 The decedent was domiciled in this county at a nonresident motorist who died in North Card jurisdiction. 			eft property or assets in this county, or was obate or for administration is pending in any					
	naving prior right to apply have renounced.							
b. I am applying subject to G.S. 28A-6-2(
c. I am the public administrator appointed		iii riccessary riotice	s be issued.					
	•		actata and have no	t ranguinged my right to do as				
3. I am not disqualified pursuant to G.S. 28A-4-2				, ,				
4. After diligent inquiry, I have determined that the (If there is a court-appointed guardian for any such								
NAME	AGE	R	RELATIONSHIP	MAILING ADDRESS				

PRELIMINARY INVENTORY

(Give values as of date of decedent's death. Continue on separate attachment if necessary.)

					PART I. PROF	PERT	Y OF THE	ESTATE	=				
1.	Accour	ccounts solely in the name of decedent (List bank, etc., account type, and balance. Do not list account nos.)								unt nos.)	ı	Est. Market	Value
										\$			
2.	Joint ac	ccounts <u>wi</u> t	thout right of sur	vivorship	(List bank, etc., account t	type, ba	alance, and joi	int owners. D	o <u>not</u> list	account nos.)			
		% Owned By Deceden							By Decedent				
								% (Owned E	By Decedent			
								% (Owned E	By Decedent			
								% (Owned E	By Decedent			
3.		Stocks/bonds/securities solely in the name of decedent or jointly owned vithout right of survivorship % Owned By Decedent								By Decedent			
4.	Cash a	and undep	osited checks	on hand			l .						
5.	5. Household furnishings												
6.	6. Farm products, livestock, equipment, and tools												
7.	Vehicle	es											
8.	Interes	sts in partr	nership or sole	proprieto	r businesses								
9.	D. Insurance, Retirement Plans, IRAs, annuities, etc., payable to Estate												
10.	D. Notes, judgments, and other debts due decedent												
11.	Miscell	laneous p	ersonal propert	.y									
12.	12. Estimated annual income of Estate												
					(Base bond on	this a	mount, if app	licable.)	TOTAL	PART I.	\$		
		P	ART II. PROF	PERTY \	WHICH CAN BE A	ADDE	D TO EST	TATE IF	NEEDE	D TO PA	Y CLA	IMS	
1.	Joint ac	ccounts wi	th right of survive	orship (Lis	st bank, etc., account typ	oe, bala	ance, and join	t owners. Do	o <u>not</u> list a	account nos.)	_		
											\$		
2	Ctooko	/banda/aa	ourition registe	rad in ha	national form and in	~ ~ ~ d	liataly transf	formed on a	do oth o	r lainth.			
۷.	Stocks/bonds/securities registered in beneficiary form and immediately transferred on death or jointly owned with right of survivorship									Joinly			
3.	3. Other personal property recoverable (G.S. 28A-15-10)												
	. Real estate owned by decedent and not listed elsewhere												
	TOTAL PART II.								PART II.	\$			
		PART III. OTHER PROPERTY											
1.	There												
2.	There are are not Insurance, Retirement Plans, IRAs, annuities, etc., payable to named beneficiaries.												
3.	There	is	is not a p	otential o	claim for wrongful de	eath a	rising unde	r G.S. 28A	\-18-2.				
Sign	ature Of A	Applicant					Signature Of						
SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME					SWORN/AFFIRMED AND SUBSCI								
Date	9		Signature Of Pers	on Authoriz	ed To Administer Oaths		Date		Signatur	e Of Person Au	ıthorized	I o Administer	· Oaths
	□ Den	outy CSC	Assistant C	sc 「	Clerk Of Superior Coun	<i>t</i>	□ Der	outy CSC	L	sistant CSC		Clerk Of Super	rior Court
			ission Expires		_ S.S.N. S. Superior Sour	•	Date Commis					J.J.N. GI Gupei	
Ш	Notary												Notary
S	EAL	County Whe	ere Notarized				County Where	e Notarized					SEAL