

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF: )  
 )  
IN THE MATTER OF: )  
 )  
(Decedent) )

IN THE PROBATE COURT

**INFORMATION TO HEIRS AND DEVISEES**

CASE NUMBER:

On \_\_\_\_\_, 20\_\_\_\_, Application/Petition was made to the Probate Court of \_\_\_\_\_ County at (address), \_\_\_\_\_, for the (check all that apply):

INFORMAL

FORMAL

PROBATE OF WILL  
 APPOINTMENT

TESTACY  
 APPOINTMENT

in the above matter.

(Complete if applicable) The Decedent's Will dated \_\_\_\_\_, Codicil(s) dated \_\_\_\_\_, and Memorandum(s) dated \_\_\_\_\_ was/were presented.

Bond HAS  HAS NOT  been filed.

This notice is being sent to persons who have or may have some interest in the estate.

**Please note: This form is required to be sent to all potential devisees and heirs of the Decedent. Receipt of this form does not mean that you will inherit from the Decedent. You may review the file in the Probate Court or see an attorney if you desire further information.**

My application/petition was granted within the past thirty (30) days on \_\_\_\_\_, 20\_\_\_\_.

Applicant/Personal Representative Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_

(Home): \_\_\_\_\_

(Cell): \_\_\_\_\_

Email: \_\_\_\_\_

Co-Applicant/Co-Personal Representative Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_

(Home): \_\_\_\_\_

(Cell): \_\_\_\_\_

Email: \_\_\_\_\_

Attorney: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_