



**3. If any child of decedent is deceased, then include their children by name, address and age (or if none state n/a)**

<u>Name Decedent's Deceased Child</u>	<u>Grandchild</u>	<u>Address</u>	<u>Zip Code</u>	<u>Age</u>

**\*\*If decedent has living children – continue to section 7. below**

**4. If decedent had no living children list names, addresses or date of death of decedent's parents**

Mother: \_\_\_\_\_/address \_\_\_\_\_ DOD: \_\_/\_\_/\_\_  
 Father: \_\_\_\_\_/ address \_\_\_\_\_ DOD: \_\_/\_\_/\_\_

**5. If decedent had no spouse or spouse, children and parents are deceased, list decedent's siblings name, address and age or date of death:**

<u>NAME</u>	<u>ADDRESS</u>	<u>ZIP CODE</u>	<u>AGE</u>

**6. If decedent had no spouse or spouse, children and parents are deceased and if decedent's siblings are deceased, list the deceased sibling and their children by name, address and age**

<u>Name Decedent's Deceased Sibling</u>	<u>Niece/Nephew</u>	<u>Address</u>	<u>Zip Code</u>	<u>Age</u>

**If no living relatives listed above or on preceding forms, please call the Surrogate's office**

**\*\*7. List names, addresses and ages of all beneficiaries of the Will:**

<u>NAME</u>	<u>ADDRESS</u>	<u>ZIP CODE</u>	<u>AGE</u>

**8. List anyone under the age of 18 receiving money/assets as a result of the decedent's death (i.e. CD's, life insurance policies, bank accounts, pensions, etc.)**

<u>MINOR AND PARENT'S NAMES</u>	<u>ADDRESS OF MINOR AND PARENT'S</u>	<u>MINOR'S AGE</u>

**ASSET INFORMATION**

You only need to list assets in the Deceased's name alone with no beneficiaries named.

Real Estate Address	Current Assessed Value	Joint? Yes or No

Car/Truck/Trailer/Boat/Plane Vehicle Identification Number	Year/Make/Model	KBB Value-Private Sale	Joint? Yes or No

Bank Name of Bank	Type of Account/Account Number	Current Value	Joint? Yes or No

Stocks/Bonds (with <i>no</i> beneficiary) Name of Company	Current Value	Joint? Yes or No

Retirement Accounts/Pension (with <i>no</i> beneficiary) Name of Company	Current Value

Policies (with <i>no</i> beneficiary) Name of Company	Current Value

Personal Property with <i>significant</i> value	Current Value

Safe Deposit Box / Bank	Current Value

***To begin the application process we require the following:***

- Administration CTA Fact Sheet Forms
- Last Will & Testament
- Codicil (amendment of Will) (if there is one)
- List (decedent's personal memorandum directing distribution of personal items) (if there is one)
- Death certificate

***Forms and other required documents can be:***

***Emailed to: Lynn Hoover, Special Probate Clerk- [lhoover@co.warren.nj.us](mailto:lhoover@co.warren.nj.us)***

***Or: Susan Custer, Probate Clerk – [scuster@co.warren.nj.us](mailto:scuster@co.warren.nj.us)***

***Faxed to: 908-475-4219***

***Mailed to: Warren County Surrogate, 413 Second Street, Belvidere, NJ 07823***

***(USPS)***

***Warren County Surrogate, 323 Front Street, Belvidere, NJ 07823 (FedEX/UPS) or***

***In Person Delivery***

***At appointment, we will require the Original Last Will & Testament,  
Codicil & List (if there are one) & Death Certificate.***

***An Administration Fee will be collected at time of appointment.***

***Once the above documents are submitted, in order to serve you  
efficiently, our office will contact you to schedule an appointment once  
all has been reviewed.***

**Warren County Surrogate's Court**

**(Mailing Address)** 413 Second Street, Belvidere, NJ 07823

(908) 475-6223 Telephone – (908) 475-4219 Fax

**(Office location)** 323 Front Street, Belvidere, NJ

**Website:** <https://www.warrencountynj.gov/government/warren-county-surrogate-s-court>