Decedent's Name:		
(Will Date/) Codicil (Amendment to Will) Codic	Date of Death:	//
	cil Date//	
Address where decedent lived: (no P.O. Box)Executor name(s) who were originally appointed by the Surrogate:		
Successor Named in Will (applicant):	Phone #	
Successor Named in Will (applicant):	Phone #	
Was decedent: [] married [] divorced [] never married [] widow/widow partner [] ex-domestic partner [] civil union partner [] ex-civil union partner	wer [] registered do	
Name of decedent's spouse/partner: add	ess:	
or if deceased, date of de	ath:	
1. Decedent's children born to decedent with decedent's most recent NAME ADDRESS	spouse or civil un ZIP CODE	ion partne AGE
	relationship's child	
	-	dren
separately)	ZIP CODE	
separately)		
2. Decedent's children from prior marriage/relationship(s): (list each separately) NAME ADDRESS		dren <u>AGE</u>

ivanic Decedent & E	Deceased Child	Grandchild	<u>ADDRESS</u>	ZIP CODE	<u>A</u>
cedent has living cl 4. If decedent had	no children list	name, addres	s or date of deat	th of decedent's pa	rents
Mother:Father:	/:	address address		DO DC	D:// D: / /
5. If decedent had by name, address a	no spouse <u>or</u> sp	ouse, children			
NAME	ADD		ZIP COD	<u>AGE</u>	
6. If decedent had			and parents ar	e deceased and if d	lecedent's
siblings are deceas Name Decedent's D				n by name, addres ESS ZIP CODE	s and age
	listed above	or on precedall beneficiari	ling forms, ple	ESS ZIP CODE	s and age E AGE
Name Decedent's D	listed above of ses and ages of 18 rance policies, be	or on precedant ADD	ling forms, ploises of the Will: RESS ney/assets as a repensions, etc.)	ease call the Sur	rogate's AGE ant's death

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

Susan Custer, Probate Clerk – scuster@co.warren.nj.us (e-mail)

To begin the application process please send copies of the following by e-mail, mail, fax or deliver to the office:

• Probate Successor Fact Sheet Forms

**Please note a fee is collected at the time of appointment, payable in cash or check

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.