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| **Office of the State Court Administrator**  1300 Broadway Ste 1200, Denver, CO, 80203 | *This box is for court use only.* |
| **In the interest of:**  **Creator**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Filed by:**  Name:  Mailing Address:  Phone  Fax:  Email:  Bar Number:  (For lawyers) |  |
| **Request for Certified Estate Planning Documents** | |

I am requesting a certified copy of an electronic estate planning document filed with the State Court Administrator pursuant to C.R.S. § 15-23-101.

**1. My Information**

My name/entity is,  **, and I am authorized to receive a certified copy of the electronic estate planning document because:**

I am the Creator. Proof of identification is attached.

I have a notarized letter authorizing access signed by the Creator. Proof of identification and the notarized letter are attached.

I am an Agent of the Creator authorized by a Power of Attorney. Proof of identification and the Power of Attorney with a certification of the Power of Attorney and the Agent’s authority as provided in C.R.S. § 15-14-742 are attached.

I am a nominated fiduciary. Proof of Identification and a copy of the original estate planning document are attached.

I am the appointed fiduciary for the Creator. Proof of identification and a certified court order are attached.

I am the court appointed conservator for the Creator. Proof of identification and the certified order are attached.

I am a named Devisee in the will for the Creator. Proof of identification and a copy of the will are attached.

I am the court-appointed fiduciary for a Devisee. Proof of identification, a certified copy of letters, and the will naming the Devisee are attached.

I am a named Beneficiary in the trust for the Creator. Proof of identification and a copy of the trust are attached.

I am the court-appointed fiduciary for a Beneficiary named in Creator’s trust. Proof of identification, a certified copy of the order of appointment, and the trust document naming me Beneficiary are attached.

Other: .

**2. Requested Information**

I request the following: *(check all that apply.)*

a certified copy of the electronic estate planning documents pursuant to C.R.S. § 15-23-119.

a certified copy of the electronic estate planning documents pursuant to C.R.S. § 15-23-120 and hereby notify the State Court Administrator that the Creator is deceased. I have attached a copy of the Creator’s death certificate/certified order determining that the Creator is deceased.

Other: .

I am making this request in good faith, and it complies with the requirements of Article 23 of Title 15. If the request is approved, mail the certified estate planning documents to the following address:

**3. Verification**

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the  day of , , at

*(date) (month) (year)*

, .

*(city or other location, and state or country)*

Print Your Name:

Your Signature: