

This is a **starter packet** containing the **bare minimum** amount of paperwork required.

Your specific case and situation may benefit from and necessitate the inclusion of additional documents.

For more information, please visit our website:



[https://www.courts.state.co.us/Courts/County/Custom.cfm?County\\_ID=2&Page\\_ID=553](https://www.courts.state.co.us/Courts/County/Custom.cfm?County_ID=2&Page_ID=553)

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address: _____		
<b>In the Matter of the Estate of:</b>  <b>Deceased</b>		<b>▲ COURT USE ONLY ▲</b>
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____		Case Number: _____  Division _____ Courtroom _____
<b>APPLICATION FOR INFORMAL APPOINTMENT OF PERSONAL REPRESENTATIVE</b>		

\*\*\*\*\* Use this form if the decedent did not leave a will \*\*\*\*\*

The applicant, an interested person pursuant to § 15-10-201(27), C.R.S., makes the following statements:

**1. Information about the applicant:**

Name: \_\_\_\_\_ Relationship to Decedent: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Mailing Address, if different: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

2. The decedent, \_\_\_\_\_, died on \_\_\_\_\_ (date) at the age of \_\_\_\_ years. The decedent was domiciled or resided in the City of \_\_\_\_\_ County of \_\_\_\_\_, the State of \_\_\_\_\_.

3. Venue for this proceeding is proper in this county because the decedent:

- ☐ had his or her domicile or residence in this county on the date of death.  
☐ did not have his or her domicile or residence in Colorado, but had property located in this county on the date of death.

4. This application is filed within the time period permitted by law. Three years or less have passed since the decedent's death, or circumstances described in § 15-12-108, C.R.S. authorize tardy probate or appointment.

5. The applicant:

- ☐ has not received a Demand for Notice of Filings or Orders and is unaware of any Demand for Notice of Filings or Orders concerning the Decedent.  
☐ has received or is aware of a Demand for Notice of Filings or Orders concerning the Decedent. See attached Demand for Notice of Filings or Orders or explanation.

6. ☐ No court has appointed a personal representative and no such appointment proceeding is pending in this state or elsewhere.

☐ A court has appointed a personal representative or an appointment proceeding is pending in the State of \_\_\_\_\_. (Attach a statement explaining the circumstances and indicating the name and address \_\_\_\_\_).

of the personal representative. Attach a certified copy of the appointing document if the appointment has been finalized.)

7. Except as may be disclosed in an attached explanation and after the exercise of reasonable diligence, the applicant is unaware of any unrevoked will relating to property in Colorado.

8. Decedent's marital and family status:

- a) Did a spouse or partner in a civil union survive the decedent? ☐ Yes ☐ No
- b) Did the decedent have a surviving parent? ☐ Yes ☐ No
- c) Did the decedent have surviving children or other descendants? ☐ Yes ☐ No
- d) Does the decedent's surviving spouse or partner in a civil union have surviving descendants who are not descendants of the decedent? ☐ Yes ☐ No
- e) Are all of the decedent's surviving descendants also descendants of the surviving spouse or partner in a civil union? ☐ Yes ☐ No
- f) Are any of the decedent's children minors? ☐ Yes ☐ No

9. The names and addresses of the decedent's spouse, partner in a civil union, children, and other heirs are as follows:

- ◆ If a guardian or conservator has been appointed for one of the persons listed below, also provide the name and address of the guardian or conservator.
- ◆ If a minor child is listed, list the child's parent(s), guardian or conservator.
- ◆ If a spouse, partner in a civil union, or child has predeceased the decedent, include the date of death.
- ◆ A sample of this section is included in the Instructions - JDF 907.

Name	Address or Date of Death	Age, only if Minor	Relationship (e.g. spouse, partner in a civil union, child, brother, guardian for spouse, etc.)

10. ☐ Applicant is 21 years of age or older and nominates himself or herself to be appointed as personal representative.

Or

☐ Applicant is 21 years of age or older and nominates himself/herself to be appointed as co-personal representative along with the following as a co-personal representative.

Name: \_\_\_\_\_ The Nominee is 21 years of age or older.

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

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

**Or**

☐ Applicant nominates the following person be appointed as personal representative.

Name: \_\_\_\_\_ The Nominee is 21 years of age or older.

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

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

**11. The nominee has priority for appointment because of:**

☐ statutory priority. (§15-12-203, C.R.S.)

☐ reasons stated in the attached explanation.

Persons with prior or equal rights to appointment are as follows:

\_\_\_\_\_  
\_\_\_\_\_

All person(s) (other than those identified in Paragraph 10 above) with prior or equal right to appointment have renounced their right to appointment (JDF 912SC). All required renouncements accompany this application.

**12. ☐ Bond is being demanded by an interested person. (Complete #13 below.)**

☐ Bond in the amount of \$ \_\_\_\_\_ has been demanded.

☐ Bond is not being demanded. (Skip #13 below.)

**13. Applicant states the following regarding the decedent's estate, if required by § 15-12-604, C.R.S.**

Estimated value of real estate	\$
Estimated value of personal property	\$
Annual income expected from all sources	\$
<b>TOTAL</b>	\$

**14. The personal representative may receive compensation.**

☐ The hourly rates to be charged, any amounts to be charged pursuant to a published fee schedule, including the rates and basis for charging fees for any extraordinary services, and any other bases upon which a fee charged to the estate will be calculated, are as stated below or in an attachment to this application. \*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ The basis of compensation has not yet been determined. \*

\* There is a continuing obligation to disclose any material changes to the basis for charging fees. (§ 15-10-602 C.R.S.)

15. The personal representative may compensate his, her, or its counsel.

☐ The hourly rates to be charged, any amounts to be charged pursuant to a published fee schedule, including the rates and basis for charging fees for any extraordinary services, and any other bases upon which a fee charged to the estate will be calculated, are as stated below or in an attachment to this application. \*

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☐ The basis of compensation has not yet been determined. \*

\* There is a continuing obligation to disclose any material changes to the basis for charging fees. (§ 15-10-602 C.R.S.)

16. The applicant requests that the registrar informally appoint the nominee as personal representative in unsupervised administration to serve:

☐ without bond ☐ with bond in the amount of \$ \_\_\_\_\_

and that Letters of Administration be issued.

☐ By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

☐ By checking this box, I am acknowledging that I have made a change to the original content of this form.

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#### VERIFICATION

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

Executed on the \_\_\_\_\_ day of  
(date)

Executed on the \_\_\_\_\_ day of  
(date)

\_\_\_\_\_,  
(month) (year)

\_\_\_\_\_,  
(month) (year)

at \_\_\_\_\_  
(city or other location, and state OR country)

at \_\_\_\_\_  
(city or other location, and state OR country)

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Signature of Co-Applicant, if any)

\_\_\_\_\_  
Attorney Signature, (if any)

\_\_\_\_\_  
Date

**Note:**

- Please remember to add any AKA names in the caption, if applicable.

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address:		<div style="text-align: center;"> <b>▲ COURT USE ONLY ▲</b> </div>
<b>In the Matter of the Estate of:</b>		
<b>Deceased</b>		
Attorney or Party Without Attorney (Name and Address):		Case Number:
Phone Number:	E-mail:	Division                  Courtroom
FAX Number:	Atty. Reg. #:	
<b>ACCEPTANCE OF APPOINTMENT</b>		

I accept appointment to, and agree to perform the duties and discharge the trust of, the office of:

- ☐ Personal Representative;
- ☐ Successor Personal Representative;
- ☐ Special Administrator; or
- ☐ Other: \_\_\_\_\_

I submit personally to the jurisdiction of this court in any proceeding relating to this matter.

## VERIFICATION

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

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,  
(date) (month) (year)

at \_\_\_\_\_  
(city or other location, and state OR country)

(printed name)

(signature)

**Note:**

- This form is for decedent estate matters only.
- For guardianships and conservatorships matters use the Acceptance of Office (JDF 805).

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address: _____  <b>In the Matter of the Estate of:</b>     Deceased	<div style="text-align: center; border-top: 1px solid black; border-bottom: 1px solid black;"> <b>▲ COURT USE ONLY ▲</b> </div> Case Number: _____  Division: _____ Courtroom: _____
<b>ORDER FOR INFORMAL APPOINTMENT OF PERSONAL REPRESENTATIVE</b>	

Upon consideration of the Application for Informal Appointment of Personal Representative filed by \_\_\_\_\_  
 \_\_\_\_\_ (applicant) on \_\_\_\_\_ (date),

**THE REGISTRAR FINDS, DETERMINES AND ORDERS:**

1. The applicant is an interested person and has filed a complete and verified application.
2. The decedent died on \_\_\_\_\_ (date) and 120 hours have elapsed since the decedent's death. If the decedent was not a resident of Colorado, 30 days have elapsed since the decedent's death, or the personal representative appointed at the decedent's domicile or residence is the applicant. (§ 15-12-307, C.R.S.)
3. The decedent was domiciled or resided in the City of \_\_\_\_\_ County of \_\_\_\_\_, State of \_\_\_\_\_.
4. Venue is proper in this county.
5. The application was filed within the time period permitted by law.
6. The decedent did not leave a will.
7. The following person is qualified to serve and is appointed as personal representative:

Name: \_\_\_\_\_ The Nominee is 21 years of age or older.  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Mailing Address, if different: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Primary Phone: \_\_\_\_\_  
 \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

8. Appointment is made without bond in unsupervised administration.
9. Letters of Administration will be issued.

Date: \_\_\_\_\_

☐ Judge   ☐ Magistrate   ☐ Registrar

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address: _____  <hr/> <b>In the Matter of the Estate of:</b>      <b>Deceased</b>	<div style="text-align: center; border-top: 1px solid black; border-bottom: 1px solid black;"> <b>▲ COURT USE ONLY ▲</b> </div> <hr/> Case Number: _____  <div style="display: flex; justify-content: space-between;"> <span>Division _____</span> <span>Courtroom _____</span> </div>
<b>LETTERS <input type="checkbox"/> TESTAMENTARY <input type="checkbox"/> OF ADMINISTRATION</b>	

\_\_\_\_\_ (name) was appointed or qualified by this court or its registrar on \_\_\_\_\_  
 \_\_\_\_\_ (date) as:

- ☐ Personal Representative; or  
☐ Successor Personal Representative.

The decedent died on \_\_\_\_\_ (date).

These Letters are proof of the Personal Representative's authority to act pursuant to § 15-12-701, et. seq., C.R.S.

- ☐ The Personal Representative's authority is unrestricted; or  
☐ The Personal Representative's authority is restricted as follows:

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Date: \_\_\_\_\_

\_\_\_\_\_  
 Probate Registrar/(Deputy)Clerk of Court

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### CERTIFICATION

Certified to be a true copy of the original in my custody and to be in full force and effect as of  
 \_\_\_\_\_ (date).

\_\_\_\_\_  
 Probate Registrar/(Deputy)Clerk of Court