

# Affidavit of Heirship Order Form

### A. Decedent Information

| Name of Decedent:Date of Death:Place of Death:Address: |                  |       |               |          |                       |
|--|------------------|-------|---------------|----------|-----------------------|
| Decedent left a will:                                  | Yes              | No    |               |          |                       |
| Decedent left unpaid debts:                            | Yes              | No    | (If yes, atta | ch list) |                       |
| Decedent left unpaid estate of                         | or inheritance t | axes: | Yes           | No       | (If yes, attach list) |

Decedent owned an interest in the following real property:

| PROPERTY ADDRESS | OWNERSHIP INTEREST |
|------------------|--------------------|
|                  |                    |
|                  |                    |
|                  |                    |

## **B.** Decedent's Marital History

At the time of Decedent's death, Decedent was:

Married Divorced Widowed Never Married

List all marriages, including those that ended in divorce or death. Write "N/A" if not applicable.

| NAME OF SPOUSE | DATE OF<br>MARRIAGE | STATUS OF<br>MARRIAGE | CURRENT ADDRESS | DATE AND PLACE<br>OF DEATH |
|----------------|---------------------|-----------------------|-----------------|----------------------------|
|                |                     |                       |                 |                            |
|                |                     |                       |                 |                            |
|                |                     |                       |                 |                            |

### C. Decedent's Family History

1. Decedent had the following children (including biological and adopted children):

| NAME OF CHILD | DATE OF<br>BIRTH | NAME OF CHILD'S OTHER<br>PARENT | CURRENT ADDRESS |
|---------------|------------------|---------------------------------|-----------------|
|               |                  |                                 |                 |
|               |                  |                                 |                 |
|               |                  |                                 |                 |

2. If any of Decedent's children listed in #1 are deceased, provide the following information:

| NAME OF DECEASED CHILD | DATE OF<br>DEATH | CHILDREN OF DECEASED CHILD |
|------------------------|------------------|----------------------------|
|                        |                  |                            |
|                        |                  |                            |
|                        |                  |                            |

3. If Decedent was not survived by descendants, provide the following information about Decedent's parents:

| NAME OF PARENT | DATE OF BIRTH | CURRENT ADDRESS OR<br>DATE OF DEATH |
|----------------|---------------|-------------------------------------|
|                |               |                                     |
|                |               |                                     |

4. If Decedent was not survived by descendants or by both mother and father, provide the following information about Decedent's siblings:

| NAME OF SIBLING | DATE OF BIRTH | CURRENT ADDRESS OR<br>DATE OF DEATH |
|-----------------|---------------|-------------------------------------|
|                 |               |                                     |
|                 |               |                                     |

#### **D.** Affiant Information

| Name of Affiant:           |                  |                |
|----------------------------|------------------|----------------|
| Address:                   |                  |                |
| Affiant knew Decedent from | (insert date) to | (insert date). |
| Relationship to Decedent:  |                  |                |

### **E. Disinterested Witness(es) Information** – *confirm witness requirements with the Title Company*

| Witness 1                  |                  |                |
|----------------------------|------------------|----------------|
| Name of Witness:           |                  |                |
| Address:                   |                  |                |
| Witness knew Decedent from | (insert date) to | (insert date). |
| Relationship to Decedent:  | 、                | 、              |
|                            |                  |                |
| With and 2                 |                  |                |
| Witness 2                  |                  |                |
| Name of Witness:           |                  |                |

| Address:                   |                  |                |
|----------------------------|------------------|----------------|
| Witness knew Decedent from | (insert date) to | (insert date). |
| Relationship to Decedent:  |                  |                |

Send completed form and Title Commitment to <u>orders@barberlawpllc.com</u>