



MARY RATHEL
Judge of Probate

Please accept our sincere condolences on the loss of your loved one. We want to do all that we can to make the probate process as simple as possible for you.

Below is some basic information regarding the probate process, website links to required forms, and a list of resources that we hope you will find helpful.

We look forward to assisting you with your loved one's estate. In the meantime, please know that our sympathy is with you and your family during this difficult time. Should you have any questions, please contact our office at 803-283-3379. Our general email is probate@lanastercountysc.gov.

Required Documentation to Start Probate:

1. The **Original** Will (to be submitted within 30 days from the date of death); If one exists.
2. A copy of the Death Certificate
3. A copy of the Obituary and Funeral Program (if available)
4. A copy of the Applicant's photo ID (person submitting documents to open the Estate)
5. A copy of the Funeral Bill and the Paid in Full receipt. If you have an agreement for indigent cremation with the Lancaster County Coroner's office, you must file a paid in full receipt or proof of contract in good standing.
6. A copy of the **most recent** deed for each piece of real estate owned by the decedent. This can be obtained at the Register of Deeds office in the County Administration building.
7. Completed **Probate Court Worksheet** (attached) to assist with determination of type of estate to be opened

Probate Court Worksheet

DECEDENT'S NAME: _____

DECEDENT'S DATE OF DEATH: _____

YOUR NAME: _____

YOUR ADDRESS: _____

YOUR EMAIL: _____

YOUR DAYTIME TELEPHONE NUMBER: _____

YOUR RELATIONSHIP TO DECEDENT: _____

LIST THE DECEDENT'S RELATIVES:

Decedent's spouse - List name, complete mailing address and year of birth:

Decedent's children still living - List name, complete mailing address and year of birth:

Full Legal Name (including all known names)	Year of Birth	Full Address	Relationship to Decedent
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of child that died before decedent →

Full Legal Name (grandchildren of decedent)	Year of Birth	Full Address	Relationship to Decedent
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_____	_____	_____	_____
_____	_____	_____	_____

Name of child that died before decedent →

Full Legal Name (grandchildren of decedent)	Year of Birth	Full Address	Relationship to Decedent
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_____	_____	_____	_____
_____	_____	_____	_____

If you answered "NONE" to all of the previous questions about relatives, list the decedent's parents:

Mother: (name) _____ Deceased?
(address) _____

Father: (name) _____ Deceased?
(address) _____

Additional Space for Additional Devisees/Heirs

Full Legal Name (including all known names)	Year of Birth	Full Address	Relationship to Decedent
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Litigation / Lawsuits

You must provide the Court with copies of the latest correspondence, court filings, mediation and arbitration concerning the litigation.

Type of Litigation: _____
Name of Attorney: _____
Address _____
City, State, Zip _____
Phone Number _____
Fax Number _____

SECTION A - REAL ESTATE

- Enter Information for All Real Estate Owned by the Decedent. If the deed reads “John Doe and Jane Doe **as joint tenants with rights of survivorship**, do **NOT** list it below.

Note: **Mobile Homes** are to be listed under **SECTION E – OTHER ASSETS**.

PROPERTY NUMBER 1:

Name(s) Property Held	
Location of Property - Street Address, City, State, and Zip Code	
Tax Map Number	

PROPERTY NUMBER 2:

Name(s) Property Held	
Location of Property - Street Address, City, State, and Zip Code	
Tax Map Number	

SECTION B – STOCKS AND BONDS

- ATTACH Photocopies of All Stocks and Bonds.

STOCK OR BOND NUMBER 1:

Company Name and Number of Shares	
Fair Market Value	\$

STOCK OR BOND NUMBER 2:

Company Name and Number of Shares	
Fair Market Value	\$

STOCK OR BOND NUMBER 3:

Name and Number of Shares	
Fair Market Value	\$

STOCK OR BOND NUMBER 4:

Company Name and Number of Shares	
Fair Market Value	\$

SECTION C - NOTES DUE DECEDENT AND CASH (BANK ACCOUNTS)

List bank account(s), Certificates of Deposit (CDs), etc. in decedent's name only (or in name of decedent and someone who died before decedent).

Note: If account is **Joint**, or set up as **Right of Survivorship** or **Pay on Death**, do **NOT** list it below.

ACCOUNT NUMBER 1:

Exact Name(s) on Account	
Type of Account	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CD
Bank/Company Name	
Dollar Amount In Account	\$

ACCOUNT NUMBER 2:

Exact Name(s) on Account	
Type of Account	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CD
Bank/Company Name	
Dollar Amount In Account	\$

ACCOUNT NUMBER 3:

Exact Name(s) on Account	
Type of Account	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CD
Bank/Company Name	
Dollar Amount In Account	\$

SECTION C - NOTES DUE DECEDENT AND CASH (continued)

Paycheck to Decedent OR ESTATE OF Not Cashed or Deposited	Amount - \$
From	

Refund Check to Decedent Not Cashed or Deposited	Amount - \$
From	

Rent Income Payable to Decedent	Amount - \$
From	

Lynches River Capital Credit due	List Amount - \$
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SECTION D - LIFE INSURANCE - PAYABLE TO THE ESTATE OR DECEDENT (NO BENEFICIARIES LISTED)

LIFE INSURANCE POLICY NUMBER 1:

Company Name	
Policy Number	
Policy Value	\$

LIFE INSURANCE POLICY NUMBER 2:

Company Name	
Policy Number	
Policy Value	\$

SECTION E - OTHER MISCELLANEOUS ASSETS

If the vehicle is titled as “**John Doe ‘or’ Jane Doe,**” do **NOT** list here.

Attached copies of the vehicle titles if available (this includes Cars, Motorcycles, ATVs, Boats AND motors, Jet Skis, Mobile Homes and Farm Equipment).

VEHICLE NUMBER 1:

Exact Name(s) On Title	
Year/Make/Model	
Vehicle Identification Number (VIN) If Applicable	
Value	\$

VEHICLE NUMBER 2:

Exact Name(s) On Title	
Year/Make/Model	
Vehicle Identification Number (VIN) If Applicable	
Value	\$

VEHICLE NUMBER 3:

Exact Name(s) On Title	
Year/Make/Model	
Vehicle Identification Number(VIN) If Applicable	
Value	\$

OWNED BUSINESS

Name	
Address	
Type of Ownership Sole Owner / Partnership	
Fair Market Value	\$

	Total Fair Market Value
HOUSEHOLD ITEMS(Such as Furniture, fixtures, etc)	\$
PERSONAL ITEMS(Clothes, Jewelry, etc)	

SECTION F - ANNUITIES AND RETIREMENT ACCOUNTS PAYABLE TO THE ESTATE

- If any of these accounts had **beneficiaries** or were titled as **pay of death**, do **NOT** list them below.

Type of Account	Company Name	Value of Account
Traditional IRA		\$
Roth IRA		\$
401K		\$
Annuity		\$
Other (Specify):		\$