

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF: HORRY )  
 )  
IN THE MATTER OF: )  
 )  
\_\_\_\_\_  
(Decedent) )

IN THE PROBATE COURT  
**APPLICATION/\*PETITION FOR  
SUCCESSOR PERSONAL REPRESENTATIVE**  
CASE NUMBER: \_\_\_\_\_ ES-26-\_\_\_\_\_

**\*ONLY COMPLETE THIS SECTION IF FILING FORMAL  
PETITION FOR SUBSEQUENT ADMINISTRATION  
(INCLUDE SUMMONS (FORM 530GC))**

\* \_\_\_\_\_  
Petitioner(s)  
vs.  
\* \_\_\_\_\_  
Respondent(s)

**INFORMAL**                       **\*FORMAL**

The previous/original application/petition is adopted, unless noted on the amended FORM 300ES attached hereto.  
The name(s) and address(es) of the most recent duly qualified and acting Personal Representative(s) for this estate is/  
was: \_\_\_\_\_

If not previously filed with the Court, a copy of the above Personal Representative's death certificate, resignation or  
termination of appointment is attached.

The name(s) and address(es) of the proposed Successor Personal Representative(s) is/are: \_\_\_\_\_

- Priority for appointment of the Successor Personal Representative is:
- named as Primary Personal Representative in Will
  - named as Alternate Personal Representative in Will
  - nominee of above Primary Personal Representative in Will
  - nominee of above Alternate Personal Representative in Will
  - surviving spouse of Decedent who is devisee of Decedent or nominee of said spouse
  - other devisee of Decedent (describe): \_\_\_\_\_ or nominee of said devisee
  - surviving spouse of Decedent or nominee of said spouse
  - other heir of Decedent (describe): \_\_\_\_\_ or nominee of said heir
  - creditor (Forty-five (45) days after death must have passed) or nominee of creditor; written statement of claim, Form #371ES, is attached
  - other (describe): \_\_\_\_\_

**\*NOTE: IF THIS IS A FORMAL PROCEEDING, IN ADDITION TO A PETITION, YOU MUST ALSO FILE  
A SUMMONS (FORM SCCA 401PC) AND PAY THE STATUTORY FILING FEE OF \$150.00.  
A HEARING IN THE PROBATE COURT ON THE PETITION MAY BE REQUIRED.**

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**VERIFICATION**

The undersigned, being sworn, states that the facts set forth in the foregoing statements are true to the best of the undersigned's knowledge, information and belief; and hereby submits to the Court's jurisdiction in this matter.

SWORN to before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Notary Public for South Carolina  
My Commission Expires: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_  
(Home): \_\_\_\_\_  
(Cell): \_\_\_\_\_  
Email: \_\_\_\_\_  
Relationship to Decedent/Estate: \_\_\_\_\_

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**ORDER FOR HEARING**

IT IS HEREBY ORDERED that a hearing on this matter be set for:

DATE: \_\_\_\_\_  
TIME: \_\_\_\_\_  
PLACE: \_\_\_\_\_

Pursuant to SCPC 62-1-401, Petitioner is ordered to give notice of this hearing to all interested persons at least twenty (20) days prior to the hearing.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

- R. Allen Beverly, Jr., Probate Judge  
 Charles R. Rhodes Jr., Chief Assoc. Probate Judge  
 Angela D. Harrison, Assoc. Probate Judge

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**ORDER OF APPOINTMENT**

IT IS HEREBY ORDERED that the above application/petition for Successor Personal Representative be

GRANTED  DENIED and

- Fiduciary Bond in the amount of \$  
 Bond not required for Personal Representative nominated by Will  
 Bond not required as Personal Representative is sole heir or sole devisee  
 Bond not required as Personal Representative is state agency, bank, or trust company  
 Bond waivers filed  
 See order dated  
 Other:

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

- R. Allen Beverly, Jr., Probate Judge  
 Charles R. Rhodes Jr., Chief Assoc. Probate Judge  
 Angela D. Harrison, Assoc. Probate Judge

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**QUALIFICATION AND STATEMENT OF ACCEPTANCE**

I accept this appointment and agree to perform the duties and discharge the trust of the office of Successor Personal Representative of this estate and hereby submit to the Court's jurisdiction in this matter.

Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone (Work): \_\_\_\_\_  
(Home): \_\_\_\_\_  
(Cell): \_\_\_\_\_  
Email: \_\_\_\_\_  
\_\_\_\_\_  
Attorney: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_