



OAKS, HARTLINE & DALY
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INFORMATION NEEDED FOR PROBATE

DECEDENT'S INFORMATION

Decedent's Name: _____

Date of Death: _____

Age of Death: _____ Date of Birth: _____

Place of Death (City, County, State): _____

Residence Street Address: _____

Decedent's Social Security No.: _____

Marital History (if divorced, when and from whom): _____

Real Property located in: _____

Approximate Value of Decedent's Estate: \$ _____

Devise to State, Governmental Agency or Charitable: _____

Children Born to or adopted after Will: _____

APPLICANT'S INFORMATION

Applicant's Name: _____

Residence Address (City, County, State): _____

Home Phone: _____ Mobile Phone: _____ E-mail: _____

Applicant's Social Security No.: _____

Information Regarding Will and Beneficiaries

You will need to provide us with the original will, or a copy of the original will if the original cannot be located. We will also need the name and address for each beneficiary named in the will.