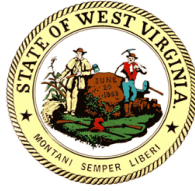


# United States of America



State of West Virginia

243 High Street Room 123  
Morgantown WV 26505-5461  
www.monongaliacountyclerk.com

County of Monongalia, ss:

Phone: (304) 291-7230  
Fax: (304) 291-7233  
estates@monongaliacountyclerk.com

---

## **OPENING PROBATE FORMS & INSTRUCTIONS** **WITH NO WILL (INTESTATE) WV Code Chapter 44**

### **1) Application of Fiduciaries/Oath of Administrator/trix Form (attached)**

- Complete the Application with the Administrator/trix (s) name, decedent's name from the death certificate, the last 4 digits of the decedent's social security number, date of death, Surety Company (estate bond, if required) and the names and last known mailing addresses of **ALL** heirs-at-law. See the .pdf Family\_Tree for assistance in determining the heirs-at-law.

### **2) Waiver of Administration (on the website, only if needed)**

- During the first 30 days after death, only the next-of-kin can open probate. If there is more than one next-of-kin, Waivers of Administration are required from each, in addition to an estate bond. The 31<sup>st</sup> day after death or later, the Waiver is not needed, but the estate bond is still required.

### **3) Administrator Bond (estate bond, attached, if needed)**

- If the Administrator/trix is the only heir-at-law, no bond is required. If there is more than one heir-at-law, an estate bond is **required** in the amount of the decedent's probate assets, excluding real estate. It needs to cover the amount of everything the decedent owned that was not jointly owned, and that did not have a beneficiary.

**\*\*All submissions must include a death certificate, which will be returned to you.**

Return the original, notarized forms, fees, and death certificate by mail (via certified or overnight mail) or they can be dropped off at the front desk. Our office hours are Monday – Friday, 8:30am to 4:30pm.

**\*\*You are welcome to drop-off your forms in person, but you may not be able to meet with the probate department without an appointment\*\***

**Filing Fees:**

**\$12 Application of Fiduciaries**

**No fee Waiver of Administration**

**\$12 Administrator Bond**

**\$20 Notice of Administration (This is the publication fee)**

**\$2.50/each Additional Letters of Administration (3 are included)**

Monongalia County Clerk's Office  
Attn: Probate Dept.  
243 High Street, Room 123  
Morgantown, WV 26505

We accept checks, money orders or credit card payments. If you'd like to pay by credit card, please indicate that with your submission and leave a phone number that our staff can reach you at Mon.-Fri. 8:30-am to 4:30pm.

We accept original, e-recorded probate documents. Please contact your attorney for information.

We will process the forms as quickly as possible and mail you three Letters of Administration and your receipt. You'll also receive the Appraisal form, which is the next part of probate. Please see Overview of the Probate Process on our website. The Appraisal form is also available on the website.

If you'd like to make an in-person appointment to speak to someone in the probate department, please:

call 304-291-7230 x 7270

email [estates@monongaliacountyclerk.com](mailto:estates@monongaliacountyclerk.com)

or use our online scheduling link at  
<https://monongaliacountyclerkoffice.as.me/schedule.php?appointmenttype=246126>



# Application of Fiduciaries

For Personal Representative of Estate for a Deceased Person On Motion of:

- Decedent:
- Last 4 of Decedent's Social Security Number:
- Date of Death:
- Surety Company (if needed):
- Surety Amount (if needed):

### Personal Representative(s)

Personal Representative(s) Name and Fiduciary Title	Personal Representative mailing address
---	---

### List of Heirs

Beneficiary Names as listed in Will, with current name as AKA; OR all Heirs-at-Law	Relationship to Decedent	Beneficiary/Heir mailing address
--	--------------------------	----------------------------------

## Affidavit & Oath

### LIST OF HEIRS, DISTRIBUTEES, DEVISEES & LEGATEES OF DECEDENT

\_\_\_\_\_ being duly sworn, deposes and says the names, residences and post-office addresses of the heirs and distributees of the Estate of \_\_\_\_\_, as set out in the foregoing affidavit are correct to the best of his or her knowledge and belief, except as to matters therein stated to be alleged on information and belief, and to those matters he or she believes them to be true; and affiant further states that such heirs and distributees as given as unknown upon diligent inquiry, he or she has been unable to ascertain their names and addresses. I will mail by first class postage prepaid, a copy of the notice of administration in accordance with West Virginia State Code §44-1-14(d) to the persons listed on this form. Further, in accordance with West Virginia State Code §44-1-3, I further swear that I will faithfully perform the duties of my office to the best of my skill and judgment.

\_\_\_\_\_  
Notarized Personal Representative Signature, Fiduciary Title

\_\_\_\_\_  
Notarized Co-Personal Representative Signature,  
Fiduciary Title (if applicable)

State of \_\_\_\_\_  
County of \_\_\_\_\_

Subscribed and sworn to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_ (printed name of Personal Representative).

NOTARY STAMP/SEAL

Notary Signature: \_\_\_\_\_  
Commission Expires \_\_\_\_\_



# Fiduciary Bond

Know All Men by These Presents:

Estate of \_\_\_\_\_ (Decedent's full name from Death Certificate or Will)

That we, \_\_\_\_\_ (name of administrator/trix) and \_\_\_\_\_

(Surety Co.), as surety in West Virginia, are held and firmly bound unto the State of West Virginia in the just and full sum of \$ \_\_\_\_\_ (amount of bond) to the payment whereof, well and truly to be made, we bind ourselves, our heirs, jointly and severally, firmly by these presents. Sealed with our seal and dated the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

THE CONDITION of the above obligation is such: That whereas the above bound \_\_\_\_\_ (name of administrator/trix) has taken the oath of \_\_\_\_\_ (administrator/trix) of the estate of \_\_\_\_\_ (name of decedent). Now, if the said \_\_\_\_\_ (name of administrator/trix) shall faithfully discharge the duties of his/her office as aforesaid and account for and pay as required by law all money which may come into his/her hands by virtue of said office of \_\_\_\_\_ (administrator/trix) then the above obligation to be void, otherwise to remain in full force and virtue.

\_\_\_\_\_  
Printed Administrator/trix Name and Fiduciary Title

\_\_\_\_\_  
**Notarized** Signature of Administrator/trix

\_\_\_\_\_  
Printed Name of Surety Company, and of Authorized Agent for Surety Company

\_\_\_\_\_  
Signature of Authorized Agent for Surety Company

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and sworn to this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,

by \_\_\_\_\_ (Printed

Name of Administrator/trix).

NOTARY STAMP/SEAL

Notary Signature: \_\_\_\_\_

Commission Expires \_\_\_\_\_