ESTATE INFORMATION SHEET

MIDDLESEX COUNTY SURROGATE'S COURT
P.O. Box 790, New Brunswick, NJ 08903-0790

Please check which office you are interested in making an appointment to sign papers.*

New Bruns___ East Bruns___ Monroe___ So.Amboy___ Piscataway___ Woodbridge___ So. Bruns___

*Subject to commission fee if processing by mail. Process by Mail_____ **

Name of Decedent:_____

Address of Decedent:_____

City State Zip

Marital Status: (circle one) Single Married Widowed Divorced

Date of Birth: _____Date of Death:_____SS#_____

Name and Address of Executor(s)/Administrator(s) _____

_____

Telephone Number of Executor(s)/Administrator(s):_____

Email Address of Executor/ Administrator:_____

Beneficiaries/Next of kin	Relationship	Address (City & State only)	Age (if a minor)

(Note:) List all children of any deceased next of kin- Give age of Minors (Add additional page, if necessary)

NJ Real Estate: Yes:_____No:_____

Total Number of Certificates Requested: _____

Name, Address, & Phone Number of Attorney (if being represented): _____

_____

If decedent died with a Will, please fill in the following:

-Date of Will: _____ # of Pages:_____

-Date of Codicil: _____ # of Pages:_____

If decedent died with NO Will, please fill in the following:

-List of Decedent's Assets- Do not list assets that are payable on death (POD) or with a named beneficiary.

ASSET	VALUE/BALANCE

Please email, fax or mail this Info Sheet along with a Death Certificate, Will & Codicil (if applicable) to begin the probate process.

THE ORIGINAL DEATH CERTIFICATE, WILL & CODICIL WILL BE REQUESTED AT A LATER TIME TO FINALIZE PROBATE.

**If processing by mail, there is a 4-5 week turn around time.

For an in-person appointment, issued papers will be received 1-2 weeks after the appointment.

Telephone (732)745-3055 Fax (732)745-4125 Email. surrogate@co.middlesex.nj.us