

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
<http://www.courts.state.nh.us>

Court Name: _____

Case Name: Estate of _____

Case Number: _____
(if known)

MOTION FOR SUMMARY ADMINISTRATION

Executor/Administrator Name _____ Telephone _____

Mailing Address _____

Executor/Administrator Name _____ Telephone _____

Mailing Address _____

1. The estate of the decedent has been open for at least 6 months. Yes No
2. To the best of my knowledge and belief, there are no outstanding debts, obligations or unpaid or unresolved claims attributable to the deceased's estate. Yes No
3. No New Hampshire estate or inheritance taxes are due; OR all applicable New Hampshire estate and inheritance taxes have been paid and a certificate from the department of revenue administration under RSA 86:32 and/or 87:25 has been filed with the court. Yes No
4. No federal estate tax is due; OR the federal estate tax return has been filed and all taxes reported thereon have been paid. Yes No
5. Court supervision of the administration of the estate is no longer necessary. Yes No
6. The administration of the estate will be completed without further court supervision in accordance with the decedent's will and applicable law. Yes No
7. Attached are either receipts or assents from all specific legatees, and assents from all other persons beneficially interested, as defined in RSA 550:12. Yes No

I certify that a copy of this document has been provided to the parties who have filed an appearance for this case or who are otherwise interested parties.

Date Executor / Administrator (must be signed in presence of notarial officer)

Date Executor / Administrator (must be signed in presence of notarial officer)

State of _____, County of _____

This instrument was acknowledged before me on _____ by _____
Date Executor/Administrator(s)

My Commission Expires _____
Affix Seal, if any Signature of Notarial Officer / Title

ORDER

- Motion for summary administration is granted.
 Motion for summary administration is denied.

Date Judge