

Atty: _____
Date: ____/____/____

PROBATE INTAKE SHEET

I. **DECEDENT:**

Name: _____

Date of Birth: ____/____/____

Date of Death: ____/____/____

Age at Death: _____

Residence: _____

County of Residence: _____

Place of Death: _____

Address of Place of Death: _____

County of Death: _____

SS No.: _____

TX DL No.: _____

II. **APPLICANT:**

Name: _____

Telephone No: _____

Email: _____

Residence: _____

County of Residence: _____

SS No.: _____

TX DL No.: _____

Age: _____

III. DECEDENT'S FAMILY HISTORY:

1. Number of Marriages: _____

2. Name of First Spouse: _____
Date of First Marriage: _____
Date of Divorce/Death: _____

3. Name of Second Spouse: _____
Date of Second Marriage: _____
Date of Divorce/Death: _____

4. Number of Surviving Children: _____

5. Name of First Child: _____
Address of First Child: _____

Name of Other Parent: _____
Date of Birth: ____/____/_____
Email: _____

6. Name of Second Child: _____
Address of Second Child: _____

Name of Other Parent: _____
Date of Birth: ____/____/_____
Email: _____

7. Name of Third Child: _____
Address of Third Child: _____

Name of Other Parent: _____
Date of Birth: ____/____/_____
Email: _____

8. Number of Deceased Children: _____

Name of Deceased Child: _____

Name of Other Parent: _____

Date of Birth: ____/____/____

Date of Death: ____/____/____

IV. DECEDENT'S ASSETS:

Real Property Address(es): _____

Mineral Interests: _____

Business Interests: _____

Vehicle (Model, Year, VIN: _____

Checking/Savings Accounts: _____

General Investments: _____

V. DECEDENT'S LIABILITIES:

Mortgage(s): _____

Credit Cards: _____

VI. SUPPORTING DOCUMENTS: Please bring the following documents to your meeting:

- Death Certificate
- Original Will (if any)
- Completed Questionnaire