

**MARK J. BARTOLOTTA, JUDGE**  
**PROBATE COURT OF LAKE COUNTY, OHIO**

ESTATE OF \_\_\_\_\_, DECEASED  
CASE NO. \_\_\_\_\_ DOCKET \_\_\_\_\_ PAGE \_\_\_\_\_

**SUPPLEMENTAL APPLICATION FOR  
ANCILLARY ADMINISTRATION**

Revised Code, Sec. 2129.04

Applicant says that the decedent named in the attached application for authority to administer the estate died [check one of the following]      owning property in this county  
   having a debtor residing in this county

Applicant is a resident of Ohio.

[Check one of the following three paragraphs]

Applicant is the general executor named in decedent's Will, and is duly appointed, qualified and acting in that capacity in the state of \_\_\_\_\_. An exemplified record of the grant of his letters of authority is attached.

Applicant is named in decedent's Will as executor of his Ohio estate.

Applicant is a resident of this county. Decedent either died intestate, or did not designate an Ohio executor or administrator in his will.

[Check if applicable]      An authenticated copy of decedent's Will, duly proved in another state, is attached and offered for record.

The estimated value of decedent's Ohio estate is \$\_\_\_\_\_.

\_\_\_\_\_  
Applicant

**MARK J. BARTOLOTTA, JUDGE  
PROBATE COURT OF LAKE COUNTY, OHIO**

**ESTATE OF \_\_\_\_\_, DECEASED**  
**CASE NO. \_\_\_\_\_**

**APPLICATION FOR AUTHORITY TO ADMINISTER ESTATE  
[R.C. 2109.02 and 2109.07]**

[For Executors and all Administrators; attach supplemental  
Application for ancillary administration, if applicable]

The applicant states that decedent died on \_\_\_\_\_

Decedent's domicile was \_\_\_\_\_  
Street Address

City or Village, or Township if unincorporated area \_\_\_\_\_ County

Post Office \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Applicant asks to be appointed \_\_\_\_\_  
of decedent's estate.

[Check whichever of the following are applicable]

- ☐ To applicant's knowledge, decedent did not leave a Will
- ☐ Decedent's Will has been admitted to probate in this Court
- ☐ A supplemental application for ancillary administration is attached.

Attached is a list of the surviving spouse, children, next of kin, and legatees and devisees, known to the applicant, which list includes those persons entitled to administer the estate.

The estimated value of the estate is:

|                                   |          |
|-----------------------------------|----------|
| Personal Property                 | \$ _____ |
| Annual real property rentals      | \$ _____ |
| Subtotal, personality and rentals | \$ _____ |
| Real Property                     | \$ _____ |
| Total estimated estate            | \$ _____ |
| Applicant owes the estate         | \$ _____ |
| The estate owes applicant         | \$ _____ |

[Check one of the following four paragraphs]

- ☐ Applicant says that decedent's Will requests that no bond be required, and therefore asks the Court to dispense with bond.
- ☐ Applicant is a trust company duly qualified in Ohio, and bond is dispensed with by law.

CASE NO. \_\_\_\_\_

- ☐ Applicant is decedent's surviving spouse and is entitled to the entire net proceeds of the estate, or applicant is the next of kin entitled to the entire net proceeds of the estate and there is no will. Bond is dispensed with by law.
- ☐ Applicant offers the attached bond in the amount of \$ \_\_\_\_\_

Applicant accepts the duties of fiduciary in the estate imposed by law, and such additional duties as may be required by the Court. Applicant acknowledges being subject to removal as fiduciary for failure to perform such duties as required, and also acknowledges being subject to criminal penalties for improper conversion of any property held as fiduciary.

\_\_\_\_\_  
Attorney for Applicant

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Applicant's Typed or Printed Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Attorney Registration No.

**WAIVER OF RIGHT TO ADMINISTER**  
**[R.C. 2113.06]**

The undersigned, being persons entitled to administer decedent's estate, and whose priority of right to do so is equal to superior to that of applicant, hereby waive appointment to administer the estate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ENTRY SETTING HEARING AND ORDERING NOTICE**

The Court sets \_\_\_\_\_ at \_\_\_\_\_ o'clock \_\_\_\_\_.M. as the date and time for the hearing the above application and orders notice to be given by the fiduciary, as provided in the Rules of Civil Procedure, to the wrongful death and survival claim beneficiaries who have not waived.

\_\_\_\_\_  
Probate Judge

ESTATE OF \_\_\_\_\_, DECEASED

CASE NO. \_\_\_\_\_

(Use with those applications or filings requiring some or all of the information in this form, for notice or other purposes. Update as required).

The following are decedent's known surviving spouse, children, and the lineal descendant's of deceased children. If none, the following are decedent's next of kin who are or would be entitled to inherit under the statutes of descent and distribution.

[illegible]

**(Check whichever of the following is applicable)**

- ☐ The surviving spouse is the natural or adoptive parent of all of the decedent's children.
- ☐ The surviving spouse is the natural or adoptive parent of at least one, but not all of the decedent's children.
- ☐ The surviving spouse is not the natural or adoptive parent of any of the decedent's children.
- ☐ There are minor children of the decedent who are not the children of the surviving spouse.
- ☐ There are minor children of the decedent and no surviving spouse.

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The following are the vested beneficiaries named in the decedent's Will:

[illegible]

**(Check whichever of the following is applicable)**

- ☐ The Will contains a charitable trust or a bequest or devise to a charitable trust, subject to R.C. 109.23 to 109.41.
- ☐ The Will is not subject to R.C. 109.23 to 109.41, relating to charitable trusts.

Date \_\_\_\_\_

Applicant (or give other title)