|  |  |  |
| --- | --- | --- |
| STATE OF SOUTH CAROLINA | ) | IN THE PROBATE COURT |
|  | ) |  |
| COUNTY OF:       | ) | **DEMAND FOR NOTICE IN AN ESTATE** |
|  | ) |  |
| IN THE MATTER OF:  | ) |  |
|       | ) | CASE NUMBER:       |
| (Decedent) | ) |  |

|  |  |
| --- | --- |
| Decedent’s Date of Death (if known):  |       |
| Decedent’s Last Mailing Address: |       |
|  |  |

I demand receipt of a copy of the following item(s) pertaining to the above estate. By filing this \*Demand for Notice, I understand that it is the responsibility of the Personal Representative to provide me with a copy of all documents he/she files in this estate. **I understand this Demand shall expire one year from date of filing**.

[ ]  Application for informal probate and/or informal appointment

[ ]  Petition for formal probate and/or formal appointment

[ ]  Information to Heirs and Devisees

[ ]  Proof of Publication of Notice to Creditors

[ ]  Inventory and Appraisement (including Supplementary, Amended or Corrected)

[ ]  Application for Settlement

[ ]  Accounting (Interim or Final)

[ ]  Proposal for Distribution

[ ]  Notice of Right to Demand Hearing

[ ]  Any petition and corresponding order

[ ]  Any hearings, Right to Appear, or Notice of Appearance

[ ]  Other (specify):

|  |
| --- |
| Executed this       day of     , 20     . |
|  |  |
| Signature: |  |
| Print Name: |       |
| Address: |       |
|  |       |
| Telephone (Work): |       |
| (Home): |       |
| (Cell): |       |  |
| Email: |       |  |
| Relationship to Decedent/Estate: |       |  |
|  |  |  |
|  |  |  |
| Attorney: |       |  |
| Address: |       |
|  |       |
| Telephone: |       |
| Email: |       |

**\*A Demand for Notice requires a $5.00 filing fee.**