

STATE OF SOUTH CAROLINA)
)
COUNTY OF RICHLAND)
)

IN THE PROBATE COURT
CASE NO:

IN THE MATTER OF THE ESTATE
FOR

-)
)
Petitioner(s),)
)
vs.)
)
)
)
_____)
Respondent(s).)
_____)

SUMMONS

TO THE RESPONDENTS LISTED ABOVE:

YOU ARE HEREBY SUMMONED and required to Answer the Petition in this action, a copy of which is herewith served upon you , and to serve a copy of your Answer upon the Petitioner(s) listed above at the following address(es):

(Name, PRINT)

(Street address or mailing address, PRINT)

(City, State, and zip code, PRINT)

Your Answer must be served on the Petitioner at the above address within **thirty (30) days** after the service of this Summons and Petition upon you, exclusive of the day of such service; and if you fail to Answer the Petition within that time, the Petitioner(s) will ask the Court for a judgment by default for the relief demanded in the Petition.

Signature of Petitioner(s)

Date: _____

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)
)
IN THE MATTER OF:)
)
_____)
(Decedent))

IN THE PROBATE COURT

CASE NUMBER: _____

Petitioner(s) vs. _____
Respondent(s)

***PETITION FOR REMOVAL OF
PERSONAL REPRESENTATIVE**

I request an Order for the removal of _____, Personal Representative in the Estate, because (check all that apply):

- The Personal Representative intentionally misrepresented material facts on the Application or Petition leading to his/her appointment. Additional Information:
- The Personal Representative disregarded a Court order. Additional information:
- The Personal Representative has become incapable of carrying out his/her assigned duties. Additional information:
- The Personal Representative has mismanaged the Estate. Additional information:
- The Personal Representative failed to perform a required duty. Additional information:
- Removal is in the best interests of the Estate because:
(Attach additional sheets if necessary.)

Executed this _____ day of _____, 20_____.

Signature: _____
Print Name: _____
Address: _____

Telephone (Work): _____
(Home): _____
(Cell): _____
Email: _____

Relationship to Decedent/Estate: _____

Attorney: _____
Address: _____

Telephone: _____
Email: _____

***NOTE: THIS IS A FORMAL PROCEEDING. IN ADDITION TO A PETITION, YOU MUST ALSO FILE
A SUMMONS (FORM SCCA 401PC) AND PAY THE STATUTORY FILING FEE OF \$150.00.
A HEARING IN THE PROBATE COURT ON THE PETITION MAY BE REQUIRED.**