

Commonwealth of Massachusetts

The Trial Court

Probate and Family Court Department

Plymouth Division

Docket No. _____

Special Administration

Name of Decedent _____

Domicile at Death _____
(street and no.) (city or town)

_____ Date of Death _____
(county) (zip)

Name and address of Petitioner(s) _____

_____ Status _____

Respectfully represent(s) that said decedent died possessed of goods and estate remaining to be administered, and that there is delay in securing the appointment of _____ of the estate of said decedent by reason of _____

The petitioner(s) hereby certif ____ that a copy of this document, along with a copy of the decedent's death certificate has been sent by certified mail to the Division of Medical Assistance, P.O. Box 15205, Worcester, Massachusetts 01615-9906.

Wherefore your petitioner(s) pray(s) that he/she/they or some other suitable person: _____ of _____ (street and no.)

_____ (city or town) _____ (county) _____ (zip) may be appointed special

administrator/administratrix of said decedent and may be authorized to take charge of all the real estate of said decedent and to collect rents and make necessary repairs; and may be authorized to continue the business of the decedent for the benefit of his/her estate, and certif _____ under the penalties of perjury that the statements herein contained are true to the best of his/her/their knowledge and belief.

Date _____ Signature _____

The undersigned hereby assent to the foregoing petition.

DECREE

All persons interested having been notified in accordance with the law or having assented and no objections being made thereto, it is decreed that _____ of _____

_____ in the County of _____ be appointed

administrat _____ of said estate, first giving bond with _____ sureties, for the due performance of said trust.

Date _____ Justice of the Probate and Family Court

For Petitioner:

Tel. No. () _____

B.B.O. # _____

For Respondent:

Tel. No. () _____

B.B.O # _____

Publication in the _____

Docket No. _____

Special Administration

Petition - Decree

Filed _____ ,20 _____

Citation Issued _____ ,20 _____

Returnable _____ ,20 _____

Allowed _____ ,20 _____

Recorded Vol. _____ Page _____

Instructions

Refer to Massachusetts General Laws Chapter 193, Section I 0.