

NEW CASE PROBATE INFORMATION SHEET

County of Kane)
County of Kendall) SS.
County of DeKalb)

Case No.: _____

(PLEASE TYPE or PRINT)

1. Case Type: **PROBATE**

2. Sub case type: _____
(See reverse for Code) Numeric Code Description

3. P1: Deceased Disabled Person Minor/Guardian

Name: _____
(Last) (First) (M.I.)

Attorney (State of Illinois Registration Number): _____

Name: _____
(Last) (First) (M.I.)

4. D1: Deceased Disabled Person Minor/Guardian
(check one)

Date of Death (if applicable): _____
(Month) (Day) (Year)

Type of Administration: Supervised Independent (check one)

Date of Birth: _____ **(FOR MINOR ONLY)**
(Month) (Day) (Year)

5. Please give the complete name, address, zip code and time of your nominee(s) for:

Executor Administrator Guardian
Name: _____

Address: _____

City, State, Zip Code: _____

6. Is real estate involved: Yes No

7. List all heirs, first name, middle initial, last name (no address required) below:

PROBATE CODES

Probate (P)

- 0708 WILL CONTEST
- 0709 CONSTRUCTION OF WILL
- 1201 DECEDENT - TESTATE INDEPENDENT ADMIN
- 1202 DECEDENT - TESTATE SUPERVISED ADMIN
- 1203 DECEDENT - INTESTATE INDEPENDENT ADMIN
- 1204 DECEDENT - INTESTATE SUPERVISED ADMIN
- 1205 DECEDENT - TESTATE OR INTESTATE OF MISSING PERSONS
- 1206 DECEDENT - SMALL ESTATE - REAL ESTATE AND PERSONAL
- 1207 DECEDENT - PROOF OF HEIRSHIP ALONE
- 1208 DECEDENT - DOMESTIC / FOREIGN WILL ADMITTED W/O ADMIN
- 1209 DECEDENT - LETTERS OF OFFICE W/O ADMIN
- 1210 DECEDENT - COLLECTION OF JUDG /SETLMNT OF CLAIM FOR WRONGFUL DEATH WITH NO OTHER ADMIN
- 1211 DECEDENT - COLLECTION OF JUDG /SETLMNT OF CLAIM FOR WRONGFUL DEATH WITH NO OTHER ADMIN AND DOES NOT EXCEED \$5,000
- 1212 GUARDIAN OF DISABLED PERSON
- 1213 GUARDIAN OF ESTATE OF DISABLED PERSON
- 1214 GUARDIAN OF PERSON & ESTATE OF DISABLED PERSON
- 1215 GUARDIAN OF MINOR PERSON
- 1216 GUARDIAN OF ESTATE OF MINOR PERSON
- 1217 GUARDIAN OF PERSON & ESTATE OF MINOR PERSON
- 1218 GUARDIAN - SMALL ESTATE - REAL ESTATE AND PERSONAL
- 1219 GUARDIAN - WHEN LETTERS ISSUED IN ESTATE TO GUARDIAN OF PERSON, BUT NOT ESTATE
- 1220 GUARDIAN - WHEN LETTERS ISSUED IN ESTATE OF WARD W/O ADMIN
- 1221 GUARDIAN - COLLECTION OF JUDG /SETLMNT OF CLAIM FOR WRONGFUL DEATH WITH NO OTHER ADMIN
- 1222 GUARDIAN - COLLECTION OF JUDG /SETLMNT OF CLAIM FOR WRONGFUL DEATH WITH NO OTHER ADMIN AND DOES NOT EXCEED \$5,000
- 1223 GUARD/MINOR DCFS
- 1224 CONST OF TEST TRST (DURING PENDENCY)
- 1230 OTHER (SPECIFY)

**THE CIRCUIT COURT FOR THE SIXTEENTH JUDICIAL CIRCUIT
DEKALB COUNTY, ILLINOIS**

IN THE MATTER OF THE
ESTATE OF:

Minor

Case No. _____

PETITIONER:

Name:
Address:
City:
State: _____ Zip: _____

PERSON HAVING CUSTODY OF MINOR:

Name:
Address:
City:
State: _____ Zip: _____

PETITIONERS NOMINEE FOR GUARDIAN:

Name:
Address:
City:
State: _____ Zip: _____

GUARDIAN FOR:

Estate Estate and Person
 Person

ATTORNEY:

Name:
Address:
City:
State: _____ Zip: _____
Telephone: _____

I, a minor over 14 years of age

Nominate _____
As Guardian in this Estate and or person.

MINOR

PETITION FOR GUARDIAN

The Petitioner, a reputable citizen of Illinois, on oath states that each of the following is a minor with the approximate value of personal estate and anticipated gross income and other receipts as shown, and that it is necessary or convenient that a guardian be appointed.

Therefore, the Petitioner asks that the nominee set forth herein, who is qualified and willing to act, be appointed as guardian of this estate and/or person.

Petitioner

Signed and Sworn to before Me _____, 20____
in _____ County, Illinois.

Clerk of Court/Notary Public

(Continued on Reverse)

Minor's Name	Date of Birth	Place of Residence

Approximate value of Minor's Personal Estate: \$ _____

Amount of Minor's anticipated gross annual income:
and other receipts: \$ _____

Minor's nearest adult relatives	Relationship	Post Office Address

Reason that Guardian should be appointed:

**THE CIRCUIT COURT FOR THE SIXTEENTH JUDICIAL CIRCUIT
DEKALB COUNTY, ILLINOIS**

**IN THE MATTER OF THE
ESTATE OF:**

Case No. _____

Deceased Minor Disabled Person

**BOND
(Surety)**

BOND TYPE:

New Additional
 Sale of Mortgage of
Real Estate

KNOW ALL MEN BY THESE PRESENTS, THAT WE, the principal and sureties named within are bound to the People of the State of Illinois in the penal sum stated herein in lawful money of the United States, for the payment of which we and each of us bind ourselves and our heirs, executors and administrators, jointly and severally by these presents.

AMOUNT OF BOND:

\$ _____

NOW THEREFORE, the condition of this obligation is such, that if the said legal representative faithfully discharge the duties of this office according to the law and does all acts which at any time may be required by law or by a Court, then this obligation is void; otherwise it remains in full force.

NAME OF PRINCIPAL:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

WITNESS our hands and seal this

_____ day of _____, 20____.

OFFICE OF PRINCIPAL (Appointee):

Executor Guardian
 Administrator (only)
 Administrator

To Collect
 De Bonis Non

With Will Annexed

_____ for/of _____

Will Estate

Estate and Person

_____ SEAL

Principal

_____ SEAL

Surety

_____ SEAL

Surety

SURETIES:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

If new or additional bond show previous executed bond.

Amount \$ _____

Date _____

If Bond is for Sale or Mortgage of Real Estate, indicate which:

Sale

Mortgage

**FIRST NAME OF EACH PRINCIPAL
AND SURETY MUST BE IN FULL**

Approved: _____, 20____

JUDGE

I, _____, certify that the Principal and Sureties named herein, who are each personally known to me to be the same persons whose names are subscribed to the above and foregoing appeared before me this day in person and acknowledged that they signed, sealed and delivered said instrument as their free and voluntary act for users and purposes as therein set forth.

DATE: _____, 20____

Clerk of the Court – Notary Public

**THE CIRCUIT COURT FOR THE SIXTEENTH JUDICIAL CIRCUIT
DEKALB COUNTY, ILLINOIS**

IN THE MATTER OF THE
ESTATE OF:

Minor

Case No. _____

PETITIONER:

Name:
Address:
City:
State: _____ Zip: _____

PERSON HAVING CUSTODY OF MINOR:

Name:
Address:
City:
State: _____ Zip: _____

PETITIONERS NOMINEE FOR GUARDIAN:

Name:
Address:
City:
State: _____ Zip: _____
Occupation: _____

GUARDIAN FOR:

Estate Estate and Person

ATTORNEY:

Name:
Address:
City:
State: _____ Zip: _____
Telephone: _____

AMOUNT OF BOND:

\$ _____
 Corporate Sureties
 Individual as Sureties

I, a minor over 14 years of age

Nominate _____

as Guardian in this Estate and or person.

MINOR

ORDER APPOINTING GUARDIAN FOR MINOR

The verified petition of the within named Petitioner for appointment of a Guardian for the above named minor, being presented for hearing, and;

It appearing to the Court that due notice has been given to all Parties entitled thereto according to law, the Court finds that it has jurisdiction of the subject matter of said petition and having heard the testimony adduced, further finds that the above named minor is a person who has not attained the age of 18 years and that the within named nominee for GUARDIAN is qualified to act as such GUARDIAN and has filed a bond as such GUARDIAN in the amount set forth herein.

IT IS ORDERED that the above named nominee be and hereby is appointed guardian of the estate and/or person.

ENTER _____
JUDGE

This _____ day of _____, 20____.

**IN THE CIRCUIT COURT FOR THE SIXTEENTH JUDICIAL CIRCUIT
DEKALB COUNTY, ILLINOIS**

IN THE MATTER OF

Case No. _____

ORDER APPOINTING GUARDIAN AD LITEM

IT IS ORDERED that _____
is appointed Guardian ad litem for:

JUDGE

ENTERED _____, 20__

**IN THE CIRCUIT COURT FOR THE SIXTEENTH JUDICIAL CIRCUIT
DEKALB COUNTY, ILLINOIS**

**IN THE MATTER OF THE
ESTATE OF**

Deceased/Disabled/Minor

Case No. _____

OATH OF REPRESENTATIVE/OFFICE

DECEDENT/Alleged Disabled Person/Minor

Name

Address

City

State

Zip

TYPE OF REPRESENTATIVE:

Administrator Only

Person

Administrator:

Estate

To collect

Person & Estate

De Bonis Non

With Will Annexed

Executor

I solemnly Swear (or affirm) that I will truly administer the estate of the decedent, so far as I know and that in administering the estate I will do and perform all acts required of me by law to the best of my ability.

Representative

Subscribed, Signed and sworn to before me

_____, 20____.

Circuit Clerk, Notary Public

REPRESENTATIVE/GUARDIAN

Name

Address

City

State

Zip

Telephone

CO- REPRESENTATIVE/GUARDIAN

Name

Address

City

State

Zip

Telephone

I _____ on oath state that I will discharge faithfully the duties of the office of
 Temporary Limited Plenary Guardian of the above named disabled person/minor.

NAME:

ATTORNEY FOR:

ADDRESS:

CITY:

Subscribed, Signed and sworn to before me

TELEPHONE:

_____, 20____.

Circuit Clerk, Notary Public

REQUIREMENTS OF GUARDIANSHIP
OF THE PERSON UNDER THE PROBATE CODE
MINORS ONLY

1. A Petition for Guardianship must be filed with the Circuit Clerk, it should state the reasons why it is requested, and what Court Orders, if any, establish the current guardian.
2. Notice to all parties who have an interest must be made by notice of motion and a copy of the petition – or a written consent to the placement or a waiver of notice can be filed. Evidence of service must also be made.
3. At Petitioner's request the Court will set a date – the date should be in sufficient time in the future to allow for notice to be sent. (Not less than 7 days excluding the date of mailing.)
4. The Court may appoint a Guardian Ad Litem or an agency to investigate the circumstance and the proposed placement and have the matter continued for that report.
5. On the date previously set, the Court conducts a hearing to determine if the requirements are met using what is in the best interest of the child(ren) as a standard.

For further information see Ill. Rev. Stat., ch. 110 ½ par. 11-1, et. Seq. 5/11-1, or 755 ILCS, et. Seq.