



**SUPERIOR COURT OF CALIFORNIA  
COUNTY OF SANTA CLARA**

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**Probate *Ex Parte* Relief Checklist**

**Case Number:** \_\_\_\_\_ **Date Submitted:** \_\_\_\_\_

**Case Name:** \_\_\_\_\_

**Party Seeking *Ex Parte* Relief:** \_\_\_\_\_

**Attorney or Party Contact Information:**

Attorney/Party Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

**Petition type:**  Heggstad  Modify Trust  Approve Settlement Agreement  
 Preliminary Distribution  Other

**Urgency:**  urgent  not urgent

**Party seeking ex parte relief is (check all that apply):**

Trustee  Personal Representative  Trust Beneficiary  Estate Heir

Surviving Spouse  Guardian  Conservator  Creditor

Other (explain): \_\_\_\_\_.

**Interested Parties - Competent Adults**

List the full name(s) and relationship(s) of all interested persons who are both adults and competent (please attach an extra sheet if more space is required):

Name	Relationship	Consent? Y / N
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_____		
_____		
_____		
_____		
_____		

**Interested Parties - Minors or Persons Lacking Capacity**

List the full name(s) and relationship(s) of all interested persons who are minors and/or otherwise lack capacity, and whether any *guardian ad litem*, conservator, or attorney in fact has been appointed (please attach an extra sheet if more space is required):

Name	Relationship	GAL/CNR/AIF
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_____		
_____		
_____		
_____		
_____		

**Qualification of Guardian Ad Litem**

The *Guardian Ad Litem* is (check all that apply):  An attorney licensed to practice in California;  Represented by an attorney licensed to practice in California;  Other (explain): \_\_\_\_\_.

**Parties who have objected or may object:**

**(Note: if the petition is contested, it must be submitted in hard copy to the Probate Filing Office)**

The following parties have indicated they object or may object to the proposed relief:

Name	Relationship
_____	_____
_____	_____
_____	_____

**Heggstad Petitions**

Evidence of the settlor’s intent is based on (check all that apply):

- Pour over will     
  General assignment     
  Assets listed on schedule A

Other: \_\_\_\_\_

**Petition to Modify Trust**

Purpose of Proposed Modification(s) (check all that apply) :

- To eliminate a bypass trust in favor of a survivor’s trust  
 To create a special needs trust where one did not exist  
 To fill a vacancy in the office of trustee   
  To modify the powers/duties of trustee(s)  
 To grant a power of appointment over an irrevocable trust  
 Other - briefly describe: \_\_\_\_\_

Authority for modification:

- Probate Code 17200   
  Probate Code 15403   
  Probate Code 15404

Probate Code 15409  Other \_\_\_\_\_

**Petition for Preliminary Distribution from an Estate**

The value of the estate as reflected in the I & A is: \_\_\_\_\_

Approximate amount owed to creditors, including lien holders: \_\_\_\_\_

Total dollar amount of assignments by beneficiaries: \_\_\_\_\_

Approximate costs of administration, including fees and reimbursements: \_\_\_\_\_

The amount of requested distribution and the person(s) to whom the distribution would be made:

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

\_\_\_\_ months have passed since letters were issued

Petition  requests  does not request additional bond be set as a result of distribution.

There  are  are not currently unpaid creditors of the estate.