

## PETITION FOR ADJUDICATION OF INTESTACY/PROBATE OF WILL

When filing a Petition for adjudication of Intestacy/Probate of Will, you must submit the required information to the Petitioner and provide a Certificate of Service for all heirs. Certificates of Service may be provided by the court when you grab a Petition, as the Petitioner you are responsible for serving all heirs with a true and accurate copy of the Petition with all the attachments you will be providing this Court.

In Accordance with Title IX, Probate Code, of the Northern Cheyenne Law and Order Code you must provide:

- Certificate of Indian Blood of the Decedent
- Verified/Certified Death Certificate of the Decedent (No Copies)
- Proof of Service upon the President of the Northern Cheyenne Tribe
- Affidavit (attached) of whether any probate proceedings are pending in any other jurisdiction and if so the name and case number of the other proceedings; include the name and address of the appointed Personal Representative of that Proceeding and their relationship to the decedent.
- A request (attached) to be appointed by this Court as the Personal Representative and a statement of qualifications of the proposed Personal Representative including, without limitation, relation to the decedent.
- Certificate of Indian Blood of the Petitioner.
- \$50.00 Money Order (filing fee).
- Copy of Will (if any).

All of the foregoing documentation is required prior to your petition being accepted and stamped in by a Clerk of this Court. A Court Bar List is available should you have the need for legal advice. Clerks of this Court CAN NOT provide guidance or assist you in filing out your petition.



Chief Judge  
Northern Cheyenne Trial Court  
Northern Cheyenne Tribe

IN THE NORTHERN CHEYENNE TRIAL COURT  
OF AND FOR THE NORTHERN CHEYENNE TRIBE  
LAME DEER, MONTANA

IN RE THE ESTATE OF: \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 DECEASED )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )

PROBATE NO. \_\_\_\_\_  
 PETITION FOR ADJUDICATION OF INTESTACY

PETITIONER ALLEGES THAT:

1. DECEDENT DIED ON OR ABOUT THE \_\_\_\_\_ DAY OF \_\_\_\_\_.
2. THE NAMES, AGES AND RESIDENCES OF THE HEIRS OF THE DECEDENT, SO FAR AS IS KNOWN TO PETITIONER ARE:

<u>NAMES AND ADDRESS</u>	<u>RELATIONSHIP</u>
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3. DECEDENT OWNED THE FOLLOWING PERSONAL PROPERTY, LOCATED WITHIN THE RESERVATION AND OF THE VALUE HEREWITH ESTIMATED BY PETITIONER:


4. AFTER THE EXERCISE OF REASONABLE DILIGENCE, PETITIONER HAS BEEN UNABLE TO FIND ANY WILL OF DECEDENT, AND PETITIONER BELIEVES DECEDENT DIED INTESTATE.

5. PETITIONER BELIEVES THAT:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

HAS PRIORITY FOR APPOINTMENT AS PERSONAL REPRESENTATIVE BECAUSE:

\_\_\_\_\_

THEREFORE PETITIONER REQUESTS THE COURT TO ISSUE AN ORDER WHICH:

1. FINDS THAT DECEDENT DIED INTESTATE:
2. DETERMINES THE DECEDENT'S LAWFUL HEIRS; AND

3. APPOINTS \_\_\_\_\_ AS THE PERSONAL REPRESENTATIVE OF  
DECEDENT'S ESTATE.

DATE: \_\_\_\_\_

\_\_\_\_\_  
PETITIONER

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_

SUBSCRIBED TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_.

\_\_\_\_\_  
CLERK OF THE NORTHERN CHEYENNE COURT

## CERTIFICATE OF SERVICE

This is to certify that on the date and time stated below, I served the attached: (mark one)

- Motion
- Response/Answer
- Notice of Appearance
- Request
- Other: \_\_\_\_\_

**Upon: (mark one)**

The Prosecutor: \_\_\_\_\_

Name of Person: \_\_\_\_\_

Name of Program/Business: \_\_\_\_\_

Personally serve at: \_\_\_\_\_  
(describe location below)  
\_\_\_\_\_

**Or by: (mark one)**

Regular 1<sup>st</sup> Class Mail: \_\_\_\_\_  
Mailing/Physical address  
\_\_\_\_\_  
City State Zip Code

Certified Mail: \_\_\_\_\_  
Mailing/Physical address  
\_\_\_\_\_  
City State Zip Code

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Signature: \_\_\_\_\_



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Dated this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Respondent

**CERTIFICATE OF SERVICE**

I certify that on the date listed below, a copy of the foregoing ANSWER was (circle one) mailed by first class mail/faxed/hand-delivered to the following:

\_\_\_\_\_  
Name, Petitioner or Petitioner's Advocate

\_\_\_\_\_  
Mailing Address (PO Box or street)

\_\_\_\_\_  
City, State, Zip Code

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Respondent