

STATE OF NEW JERSEY  
HUDSON COUNTY SURROGATE COURT

In the Matter of the Estate of:

Deceased

APPLICATION FOR VOLUNTARY  
DISCHARGE OF PERSONAL  
REPRESENTATIVE

I, \_\_\_\_\_, residing at \_\_\_\_\_,  
\_\_\_\_\_, says:

- 1. Decedent died testate on \_\_\_\_\_, a resident of \_\_\_\_\_, leaving a Will dated \_\_\_\_\_, wherein I was appointed Personal Representative by the Hudson County Surrogate on \_\_\_\_\_;
- 2. I am unwilling or unable to perform the duties and powers of the office and request to be discharged as Personal Representative;
- 3. All interested parties to this Estate are listed on the attached page with a description of his/her interest;
- 4. All parties in interest to this Estate have consented to the voluntary request for discharge and this discharge is not intended to impair the rights of any party's interest or creditor of the Estate;

Wherefore the applicant requests judgment:

- 1. Discharging the applicant as Personal Representative of the Estate pursuant to N.J.S.A. 3B:14-18;
- 2. Revoking the Letters previously granted to the applicant; and
- 3. Appointment of a Successor or Substitute Personal Representative of the Estate;

\_\_\_\_\_  
Applicant:

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

Applicant being duly sworn, upon oath deposes and says that I am the applicant in the foregoing application and allegations thereof are true to the best of my knowledge and belief.

\_\_\_\_\_  
Applicant:

Subscribed and sworn to before me,  
on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
A(n) Notary Public or Attorney at Law of NJ

Docket No.

STATE OF NEW JERSEY  
HUDSON COUNTY SURROGATE COURT

In the Matter of the Estate of:

Deceased

**CONSENT TO VOLUNTARY DISCHARGE**

TO THE SURROGATE OF THE COUNTY OF HUDSON:

BE IT KNOWN, that I, \_\_\_\_\_, an interested party named in the Last Will and Testament of the above named Decedent who died on \_\_\_\_\_, do hereby consent and agree to the voluntary discharge of \_\_\_\_\_, as Personal Representative of the Estate, and he/she shall be discharged from his/her fiduciary duties as requested.

\_\_\_\_\_  
Name:

**CONSENT TO WAIVE FINAL ACCOUNTING**

BE IT FURTHER KNOWN, that I, \_\_\_\_\_, an interested party named in the Last Will and Testament of the above named Decedent who died on \_\_\_\_\_, do hereby consent and agree that \_\_\_\_\_, the current Personal Representative of the Estate, is not required to provide a final accounting of the Estate, and I am waiving my right to request a verified final accounting showing the true condition of the Estate.

\_\_\_\_\_  
Name:

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

Be it remembered, that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned authority, personally appeared \_\_\_\_\_, who I am satisfied is the person in the foregoing instrument, to whom I first make known the contents thereof, and thereupon he/she acknowledged that he/she signed, sealed and delivered the same as his/her act and deed, for the uses and purposes therein expressed.

\_\_\_\_\_  
A(n) Notary Public or Attorney at Law of NJ

Docket No.  
Died  
Filed

PRO SE

TILO E. RIVAS  
SURROGATE

**JUDGMENT DISCHARGING  
PERSONAL REPRESENTATIVE**

THIS MATTER, having been opened to the Court on application of \_\_\_\_\_,  
seeking discharge as Personal Representative of the Estate of \_\_\_\_\_,  
and Letters Testamentary having been issued on \_\_\_\_\_; and the Surrogate having  
received a request to be discharged, and having received notarized written consents from all  
interested parties approving the request for discharge, and all interested parties having waived the  
requirement for a final verified accounting; and for good cause having been shown,

It is thereupon on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

**ORDERED** that \_\_\_\_\_, the Personal Representative of the Estate,  
appointed on \_\_\_\_\_, is **DISCHARGED** as Personal Representative, pursuant to  
N.J.S.A. 3B:14-18; and the Letters Testamentary issued are hereby **REVOKED**;

\_\_\_\_\_  
TILO E. RIVAS - SURROGATE

Docket No.

STATE OF NEW JERSEY  
HUDSON COUNTY SURROGATE COURT

In the Matter of the Estate of:

Deceased

INTERESTED PARTIES

NAME OF INTERESTED PARTY	ADDRESS	DESCRIPTION OF INTEREST

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

Applicant being duly sworn, upon oath deposes and says that I am the applicant in the foregoing application and allegations thereof are true to the best of my knowledge and belief.

Applicant: \_\_\_\_\_

Subscribed and sworn to before me,  
on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
A(n) Notary Public or Attorney at Law of NJ