



Acoma Tribal Courts
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IN THE TRIBAL COURT
PUEBLO OF ACOMA
STATE OF NEW MEXICO

CAUSE NO: _____-PR-_____

IN THE MATTER OF THE PETITION OF:

FOR THE ESTATE AND PROPERTY OF:

_____, DECEASED,

**APPLICATION FOR APPOINTMENT OF PERSONAL
REPRESENTATIVE and PETITION TO PROBATE ESTATE**

That I, _____, the Applicant herein, hereby state the following:

1. That I am the _____ of the decedent and I am therefore a
(relationship)
person interested in the settlement of the deceased's estate.
2. That the deceased, _____, died on _____,
20 ____, at the age of _____ years. At the time of his/her death, the decedent was domiciled
in the Pueblo of _____, State of _____,
therefore venue would be in this court.
3. That the deceased was an enrolled member of _____ Pueblo/Tribe, census
number: _____.
4. That the decedent [**did not leave or** **left**] a surviving spouse. If the decedent did leave a
surviving spouse, please list the name of the surviving spouse:
_____. The decedent was married from
_____/_____/_____ to ____/____/_____ and had _____ children.

(if the decedent had any previous marriages please indicate below)

- a. The decedent was married from ____/____/_____ to ____/____/_____
and had _____ children.
- b. The decedent was married from ____/____/_____ to ____/____/_____
and had _____ children.

5. That the decedent was not married. The decedent [**did or** **did not**] have children. Please list number of children: _____.
6. That a will was left which is attached and marked as exhibit A.
7. That according to Title IV, Chapter 6, Section 4-6-5 of the Pueblo of Acoma Law and Order Code, such section provided for approval of wills. When any member of the Acoma Pueblo Indian Tribe dies, leaving a will disposing of any property, the Acoma Pueblo Tribal Court shall, at the request of any member of the Tribe named in the will or any other interested party, determine the validity of the will after giving notice and full opportunity to appear in Court to all persons who might be heirs of the decedent, such notice to be given as provided in Title 3, § 3-2-[2], of this Code.
8. As far as the applicant knows, the decedent died without a will and left no devices.
9. The applicant is a resident and member of the Pueblo of _____, State of _____.
10. No personal representative of the decedent had been appointed in the Pueblo of Acoma, in the county of _____ nor in the State of _____ or elsewhere.
11. That according to Title IV, Chapter 6, Section 4-6-4 of the Pueblo of Acoma Law and Order Code, such section provided for the determination of heirs, any person claiming to be an heir of the decedent may bring suit in the Tribal Court to have the Court determine the heirs of the decedent and to divide among the heirs such property of the decedent.
12. To the best of my knowledge, the following individuals are the heirs of the decedent and may be entitled to the share in the distribution of the property:

a.

| Name | Age | Relationship |
|--------------------------------------|-----|-----------------------|
| Mailing & Physical Address | | City, State, Zip Code |
| Phone Number (Home / Cell / Message) | | Email (optional) |

b.

| Name | Age | Relationship |
|--------------------------------------|-----|-----------------------|
| Mailing & Physical Address | | City, State, Zip Code |
| Phone Number (Home / Cell / Message) | | Email (optional) |

c.

| | | |
|--------------------------------------|-----|-----------------------|
| Name | Age | Relationship |
| Mailing & Physical Address | | City, State, Zip Code |
| Phone Number (Home / Cell / Message) | | Email (optional) |

d.

| | | |
|--------------------------------------|-----|-----------------------|
| Name | Age | Relationship |
| Mailing & Physical Address | | City, State, Zip Code |
| Phone Number (Home / Cell / Message) | | Email (optional) |

e.

| | | |
|--------------------------------------|-----|-----------------------|
| Name | Age | Relationship |
| Mailing & Physical Address | | City, State, Zip Code |
| Phone Number (Home / Cell / Message) | | Email (optional) |

f.

| | | |
|--------------------------------------|-----|-----------------------|
| Name | Age | Relationship |
| Mailing & Physical Address | | City, State, Zip Code |
| Phone Number (Home / Cell / Message) | | Email (optional) |

13. That the following assets and property (for example: bank-stocks, bonds or certificates, life insurance policies, homes/cars titles & deeds, etc.) were owned by the deceased:

| | <u>Item:</u> | <u>Estimated Value</u> | <u>Location of property</u> |
|----|--------------|------------------------|-----------------------------|
| a. | _____ | _____ | _____ |
| b. | _____ | _____ | _____ |
| c. | _____ | _____ | _____ |
| d. | _____ | _____ | _____ |
| e. | _____ | _____ | _____ |

14. The following debts (for example: utility bills, credit card bills, personal loans, medical bills, car loans etc.) were owed by the deceased on the date of death:

| | <u>Person/Company Owed</u> | <u>Address & Phone Number</u> | <u>Amount Owed</u> |
|----|----------------------------|-----------------------------------|--------------------|
| f. | _____ | _____ | _____ |
| g. | _____ | _____ | _____ |
| h. | _____ | _____ | _____ |
| i. | _____ | _____ | _____ |
| j. | _____ | _____ | _____ |

15. That the surviving heirs of the decedent have indicated that this applicant should be appointed as the personal representative of decedent’s estate and such individuals have signed affidavits of renunciation of their rights to appointment and concurrence in the appointment of this applicant. Such affidavits are hereby attached to this application and are hereby incorporated in the application by reference.

WHEREFORE, THE APPLICANT HEREBY PRAYS THE COURT:

- 1) For appointment as the personal representative of the estate and that letter of administration be issued to the applicant, and
- 2) That further proceedings in this court in connection with the administration of decedent’s estate be placed on abeyance until other matter can be settled.

Respectfully submitted,

| | | |
|--------------------------------------|------------|-----------------------|
| Signature | Print Name | Date |
| Mailing Address | | City, State, Zip Code |
| Physical Address | | City, State, Zip Code |
| Phone Number (Home / Cell / Message) | | Email (optional) |