

General Information for Filing a
Petition for Letters of Administration C.T.A.
Rev. 11-2018

Information that you enter on these forms can be saved on your computer ONLY if you are using Adobe Acrobat Version 8.0 or higher. They can be completed using the FREE Adobe Reader but you will not be able to save the information you enter.

The forms listed below are interactive. You can enter the information on these forms before you print them. If you fill the forms in on your computer, much of the information you enter on one form is automatically transferred to the other forms. For example, when you type a name as petitioner on the “Petition for Letters of Administration”, that name will appear on any of the other forms where petitioner appears.

The packet contains bookmarks. These bookmarks help you navigate throughout these forms. There are “links” embedded in the forms. These links are usually green, and can take you to a related location in the forms. There is a hyperlink that will take you to the Missouri HealthNet Waiver form.

The Filing Requirement Checklist is now included in the packet.

E-filing information – the Petition for Letters of Administration C.T.A.. Exhibits A and B can be submitted as one document. The Petition for Probate of Will and the Will **MUST** be submitted as separate documents. If applicable, the Consents to Independent Administration, Waiver of Right to Serve as Named Personal Representative, Renunciations of Right to Administer and Nomination of Person to Administer, Designation of Resident Agent and Bond **MUST** be filed as separate documents. Multiple consents, waivers and renunciations can be submitted as one (1) pdf document but must be a separate document from the petition.

Table of Contents

You may click on the green underlined text below to take you to each of the forms.

1. [Checklist of Requirements to File a Petition for Letters of Administration Cum Testamento Anexo \(C.T.A\) \(With Will Attached\) \(CCPR166-W\)](#)
Used as a guideline for all requirements to file a Petition for Letters of Administration C.T.A. – when the person asking to be appointed as personal representative is not named in the will but is an interested party and able to serve.
2. [Application for Probate of Will \(CCPR143-W\)](#)
This form may be completed by the petitioner and attorney or just the attorney for petitioner. It should be completed with the requested information as best they can. If there are areas that are not applicable, put N/A. Do not leave any question blank.
3. [Petition for Letters of Administration Cum Testamento Anexo \(C.T.A\) \(With Will Attached\) \(CCPR078-W\)](#)
This form must be completed and signed by the petitioner and attorney. It should be completed with the requested information as best they can. If there are areas that are not applicable, put N/A. Do not leave any question blank.
4. [Exhibit A – Heirs \(CCPR148-W\)](#)
Use this form to list all of the heirs of the decedent. It can be filed as part of the Petition for Letters of Administration C.T.A.
5. [Exhibit B – Legatees \(CCPR149-W\)](#)
Use this form to list all of the legatees of the decedent. It can be filed as part of the Petition for Letters of Administration C.T.A.
6. [Commission Request \(CCPR144-W\)](#)
This form should be used when requesting Commissions to issue for will witnesses. There is an additional fee for this – see Checklist.
7. [Consent to Independent Administration \(CCPR160-W\)](#)
This form is required when requesting Independent Administration and must be filed by all competent adult heirs. Multiple consents can be filed as one (1) pdf document but must be a separate document from the petition.
8. [Waiver of Right to Serve as Named Personal Representative \(CCPR162-W\)](#)
If the person asking to be appointed personal representative is not named in the will to serve, each of the persons named to serve in the will must file this waiver.

9. Renunciations of Right to Administer and Nomination of Person to Administer (CCPR161-W)

This form must be filed by all persons entitled to act as personal representative nominating the person to act as personal representative. Multiple renunciations can be filed as one (1) pdf document but must be a separate document from the petition.

10. Designation of Resident Agent/Acceptance of Appointment as Resident Agent (CCPR163-W)

When the person asking to be appointed personal representative does not live in Missouri, this form must be completed and filed.

11. Corporate Surety Bond – Decedent’s Estate (CCPR164-W)

May be required for all persons asking to be appointed as personal representative.

**CIRCUIT COURT OF ST. LOUIS COUNTY
PROBATE DIVISION**

**Checklist of Documents Required to File a
Petition for Letters of Administration,
Cum Testamento Annexo (C.T.A.)
(With Will Attached)**

Case Category – Probate Decedent Estates

**Case Type – Independent Administration – With Will
Supervised Administration – With Will**

NOTE: Local Court Rule 3.2 mandates all electronically filed pleadings must be typewritten. Local Court Rule 72.2 governs specific requirements for electronic filing in the Probate Division. Documents shown in bold italics should be filed as separate documents.

COURT FORMS:

- 1. ***Petition to Admit Will to Probate – if applicable. See instructions. (Document Category – Affidavit for/in/of – Death and Application for Probate of Will)***
- 2. ***Petition for Letters of Administration, Cum Testamento Annexo (C.T.A) (With Will Attached) See instructions. (Document Category – Application for Letters – Administration With Will Annexed)***
- 3. Exhibit A – Heirs – can be filed as part of Petition for Letters Testamentary
- 4. Exhibit B – Legatees – can be filed as part of Petition for Letters Testamentary
- 5. ***Commission Request – if applicable. See instructions. (Document Category – Request for/to – Request (other))***
- 6. ***Consent to Independent Administration, if applicable. See instructions. (Document Category – Consent by/for/to – Independent Administration)***
- 7. ***Waiver of Right to Serve as Named Personal Representative. See instructions. (Document Category – Waiver of)***
- 8. ***Renunciations of Right to Administer and Nomination of Person to Administer, if applicable. See instructions. (Document Category – Filing – Other/Miscellaneous – Renunciation – Right to Serve)***
- 9. ***Designation of Resident Agent/Acceptance of Appointment as Resident Agent, if applicable. See Instructions. (Document Category – Filing – Other/Miscellaneous – Designation of Resident Agent)***
- 10. ***Corporate Surety Bond – Decedent’s Estate, if applicable. See instructions. (Document Category – Filing – Other Miscellaneous – Surety Bond)***

ADDITIONAL DOCUMENTS:

- 1. E-filed copy of the ***Will*** (Document Category – Filing – Other/Miscellaneous)

- 2. Copy of **Death Certificate** to verify date of death and jurisdiction. (*Document Category – Certificate of*)
- 3. **Request for Hearing, if applicable. See instructions.** (*Document Category – Request for/to – Request (other)*)
- 4. **Motion to Waive Bond, if applicable. See instructions.** (*Document Category – Motion to/for*)
- 5. **Consents to Waiver of Bond, if applicable. See instructions.** (*Document Category – Consent by/to/for – Consent (other)*)
- 6. **Missouri HealthNet Waiver** (*Document Category – Filing – Other/Miscellaneous*). Hyperlink for form: <https://dss.mo.gov/mhd/general/pdf/886-4354.pdf>

INSTRUCTIONS:

- 1. An Application for Probate of Will must have been **filed** within one (1) year from date of decedent’s death.
 - If will was previously admitted within 1 year of date of death, petition may be filed at any time, no time limitations.
- 2. Party information for all parties must be entered into e-filing system. This includes the decedent, spouse, heirs, legatees, and designated agent **with full social security numbers and birth dates.**
- 3. Fill in **all blanks** and **check boxes** on all forms. If not applicable, please indicate by using N/A.
- 4. Admitting Will:
 - If previously admitted – **STOP!** See instructions below for ***Petition for Letters of Administration, Cum Testamento Annexo (C.T.A) (With Will Attached)***.
 - Requesting admission of Will –
 - Requires filing of 2 forms –
 - Application for Probate of Will***
 - Petition for Letters of Administration, Cum Testamento Annexo (C.T.A) (With Will Attached)***
 - Original Will or physical copy of copy if asking to admit a lost will must be delivered to the court within 48 business hours
 - Commissions –
 - If will is not self-proving and witnesses cannot come into the court to prove the will.
 - File a ***Commission Request***
 - Fees – shown under Filing Fees section.
- 5. ***Petition for Letters of Administration, Cum Testamento Annexo (C.T.A) (With Will Attached)***
 - Complete name of decedent along with age and sex
 - Complete residence address of decedent
 - Date of death of decedent
 - Estimate of values for real estate and personal property
 - Name(s) of personal representative(s) designated in will

- Check appropriate box for marital status of decedent
 - Widowed – need date of death of Spouse
 - Married – need name and complete address of surviving Spouse
 - Check appropriate box for spouse as parent of all decedent’s children
- Exhibits A and B – list complete names, addresses, and relationships of all heirs and legatees
- Check appropriate box for requesting independent or supervised administration
- Check appropriate boxes for
 - With or without supervision of court
 - With or without bond
- Non-resident petitioner –
 - List name of person designated as resident agent
 - Complete signature block information for Designated Resident Agent
- Complete affirmation date
- Must be signed by petitioner and attorney
- Check box for choice of newspaper for publication of Notice of Letters

- 6. Independent Administration requested:
 - Will provides for independent administration or
 - File ***Consents to Independent Administration*** from all competent adult legatees. Multiple consents can be filed as one (1) pdf document but must be a separate document from the petition.

- 7. Appointment of Personal Representative – **not** named in the will serve – **MUST** be filed by an interested party):
 - File ***Waiver of Right to Serve*** as personal representative from those named to serve in will.
 - File ***Renunciation of Right to Administer and Nomination of Person to Administer*** from all legatees or file a ***Request for Hearing**** to set the petition for hearing. Multiple waivers can be filed as one (1) pdf document but must be a separate document from the petition.
 - *Filing ***Request for Hearing***, the court will require proof of bond qualification prior to setting the petition for hearing.
 - Non-resident:
 - File ***Designation of Resident Agent/Acceptance of Appointment as Resident Agent***

- 8. ***Bond:***
 - Because petitioner is not named to serve without bond, they **MUST** be bonded.
 - Supervised Administration:**
 - Corporate Surety Bond – Decedent’s Estate***
 - Amount of the personal property rounded up to the next thousand
 - Value of personal property shown as \$0.00 – need \$1,000.00 bond
 - Value of personal property shown as unknown- need \$40,000.00 bond.
 - Requires Acknowledgment of Principal; Acknowledgment of Surety; and Power of Attorney for Attorney in Fact to be attached to bond.

- Independent Administration:**
 - Corporate Surety Bond – Decedent’s Estate*
 - Amount of the real and personal property rounded up to the next thousand.
 - Requires Acknowledgment of Principal; Acknowledgment of Surety; and Power of Attorney for Attorney in Fact to be attached to bond.
- Bond waived – a *Motion to Waive Bond* may be filed when all requirements listed below have been met:
 - If your petition is on file; has not been granted and the 1 year expires while pending.
 - Consents* to waive bond from all adult competent legatees are attached.
 - Missouri HealthNet Waiver* is filed.
 - Any exceptions will be decided on a case by case basis.

FILING FEES:

- Click hyperlink for most recent fees.
<http://wp.stlcountycourts.com/wp-content/uploads/PDF/Probate/ProbateFees.pdf>

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

_____ No. _____
Decedent

APPLICATION FOR PROBATE OF WILL

The undersigned states that _____, who resided at _____, died on _____
Street Address City State Zip Code

and was domiciled in St. Louis County at the time of death.

That decedent left an instrument purporting to be his her Last Will and Testament dated _____, and Codicil to said Last Will and Testament dated _____.

The decedent's will is is not self proving per 474.337 RSMo. If self proving, undersigned asks that it be admitted as self proving.

At death decedent was single married widowed – spouse date of death _____ divorced. The surviving spouse is _____ who resides at _____

If instrument(s) is not self proving, the subscribing witnesses to said instrument(s) are: _____

WHEREFORE, your applicant prays the court consider said instrument(s) in writing to be duly proved, admitted to probate, certified and recorded as the last will and testament of the decedent.

The foregoing is made on this _____ day of _____, _____, under oath or affirmation and its representations are true and correct to the best of applicant's knowledge and belief subject to the penalties of making a false affidavit or declaration.

Attorney's Signature

Applicant's Signature

Attorney's Name (Typed)

Applicant's Name (Typed)

Street Address

Street Address

City State Zip Code

City State Zip Code

Telephone No. Bar No.

Telephone No.

E-Mail Address

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

_____ No. _____
Decedent

PETITION FOR LETTERS OF ADMINISTRATION,
CUM TESTAMENTO ANNEXO (C.T.A.)
(WITH WILL ATTACHED)

Come(s) now _____, of full age, and state(s) that
_____, _____, _____, whose domicile and last
residence address was _____,
Age Sex
Street Address City State Zip Code

St. Louis County, Missouri, died testate on the _____ day of _____, _____; that
decedent left real property in the State of Missouri with a probable value of \$_____ and
personal property with a probable value of \$_____; that decedent's will designates as personal
representative(s) the following: _____

to serve with without bond.

Decedent's Last Will and Testament has previously been admitted to probate by this court on _____,
or a Petition to Admit Will to Probate is filed simultaneously herewith.

Petitioner(s) further state(s) that he she they will make a perfect inventory of the estate, pay the debts and
legacies, if any, as far as the assets extend and the law directs, account for and distribute or pay all assets which come into
 his her their possession and perform all things required by law touching the administration of the estate.

At death, decedent was single; married; widowed – spouse's date of death _____; divorced.

The surviving spouse is _____ who resides at _____.

If married, decedent's spouse is is not the parent of all of decedent's children.

Petitioner(s) further state(s) that the NAMES, RESIDENCE ADDRESSES and RELATIONSHIPS to decedent of the
heirs, devisees and legatees are set forth on the attached Exhibit A – Heirs and Exhibit B - Legatees; further the names and
addresses of any guardians or conservators of any minors or disabled heirs, devisees or legatees and the birthdates of any
minor heirs, devisees or legatees are set forth on the attached Exhibit A – Heirs and Exhibit B - Legatees.

There are no other heirs, devisees or legatees known to petitioner(s) who are of unsound mind or other heirs, devisees
or legatees whose names and addresses are unknown to petitioner(s).

Supervised Independent administration is requested.

WHEREFORE, petitioner(s) pray(s) that the court appoint _____

personal representative(s) to administer decedent's estate with without supervision of the court and with without bond.

If petitioner(s) is a nonresident of Missouri or is a corporation organized under the laws of another state or country, that petitioner appoint _____ as resident agent for service of process.

The foregoing is made on this _____ day of _____, _____, under oath or affirmation, and its representations are true and correct to the best of petitioner(s) knowledge and belief subject to the penalties of making a false affidavit or declaration.

Attorney's Signature

Attorney's Name (Typed)

Street Address

City State Zip Code

Telephone and Fax Number

E-mail Address

Attorney's Signature

Attorney's Name (Typed)

Street Address

City State Zip Code

Telephone and Fax Number

E-mail Address

Petitioner's Signature

Petitioner's Name (Typed)

Street Address

City State Zip Code

Telephone and Fax Number

Petitioner's Signature

Petitioner's Name (Typed)

Street Address

City State Zip Code

Telephone and Fax Number

Designated Resident Agent's Signature

Designated Resident Agent's Name (Typed)

Street Address

City State Zip Code

Telephone and Fax Number

Publish Notice of Letters in:
 St. Louis County Legal Ledger
 Missouri Lawyers Media (St. Louis Countian)

NOTE: Missouri Healthnet Waiver must be filed before the estate can be closed. Hyperlink to form: <https://dss.mo.gov/mhd/general/pdf/886-4354.pdf>

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

_____ No. _____
Decedent

EXHIBIT A - HEIRS

***Any information that is not applicable should be marked N/A on the name line.**

SPOUSE OF DECEDENT:

Name _____ Deceased Date of Death _____

Address: _____

List Personal Representative of Estate and Estate Number if Deceased Spouse Survived Decedent:

LIVING CHILDREN OF DECEDENT:

Name _____ Mutual child of Decedent and Spouse? Yes No

Address _____ Under Age 18? Yes No

Name _____ Mutual child of Decedent and Spouse? Yes No

Address _____ Under Age 18? Yes No

Name _____ Mutual child of Decedent and Spouse? Yes No

Address _____ Under Age 18? Yes No

Name _____ Mutual child of Decedent and Spouse? Yes No

Address _____ Under Age 18? Yes No

Name _____ Mutual child of Decedent and Spouse? Yes No

Address _____ Under Age 18? Yes No

DECEASED CHILDREN OF DECEDENT:

Name _____ Mutual child of Decedent and Spouse? Yes No

Date of Death: _____ Attach List of Descendants if Predeceased Yes N/A

List Personal Representative of Estate and Estate Number if Deceased Child Survived Decedent:

Name _____ Mutual child of Decedent and Spouse? Yes No

Date of Death: _____ Attach List of Descendants if Predeceased Yes N/A

List Personal Representative of Estate and Estate Number if Deceased Child Survived Decedent:

ONLY COMPLETE - If Decedent had no spouse or children/grandchildren:

MOTHER:

Name _____ Deceased Date of Death _____
Address _____

FATHER:

Name _____ Deceased Date of Death _____
Address _____

LIVING SIBLINGS:

Name _____	Whole Sibling <input type="checkbox"/> Yes <input type="checkbox"/> No
Address _____	Under Age 18? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Whole Sibling <input type="checkbox"/> Yes <input type="checkbox"/> No
Address _____	Under Age 18? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Whole Sibling <input type="checkbox"/> Yes <input type="checkbox"/> No
Address _____	Under Age 18? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Whole Sibling <input type="checkbox"/> Yes <input type="checkbox"/> No
Address _____	Under Age 18? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Whole Sibling <input type="checkbox"/> Yes <input type="checkbox"/> No
Address _____	Under Age 18? <input type="checkbox"/> Yes <input type="checkbox"/> No

DECEASED SIBLINGS:

Name _____ Whole Sibling Yes No
Date of Death: _____ Attach List of Descendants if Predeceased Yes N/A
List Personal Representative of Estate and Estate Number if Deceased Sibling Survived Decedent:

Name _____ Whole Sibling Yes No
Date of Death: _____ Attach List of Descendants if Predeceased Yes N/A
List Personal Representative of Estate and Estate Number if Deceased Sibling Survived Decedent:

***Attach additional sheets if necessary.**

**If Decedent had no spouse, children, or grandchildren and Decedent's parents pre-deceased and Decedent had no siblings or their siblings pre-deceased without descendants, provide the names, addresses, and relationship of any remaining heirs-at-law on a family tree attached to this form.
§ 473.017 and § 474.010 RSMo.**

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

Deceased

No. _____

EXHIBIT B - LEGATEES

NAME

RESIDENCE ADDRESS

RELATIONSHIP
TO DECEDENT

IF MINOR,
BIRTHDATE

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

Estate of

_____ Deceased
whose date of death is _____

No. _____
Date: _____

COMMISSION REQUEST

Attorney, _____, hereby requests that a commission be issued to the following persons:

*PLEASE NOTE: If the witness is to prove anyone other than their own signature, you must indicate the name of the witness they are familiar with.

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Reason for Commission(s): _____

Attorney's Signature: _____

Address: _____

Phone: _____

E-mail: _____

Bar No. _____

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

_____ No. _____
Deceased

CONSENT TO INDEPENDENT ADMINISTRATION

The undersigned, _____,
Name (typed)

hereby consents to independent administration of the estate of the above named decedent.

Date

Signature

Street Address

City State Zip Code

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

_____ No. _____
Deceased

**WAIVER OF RIGHT TO SERVE
AS NAMED PERSONAL REPRESENTATIVE**

The undersigned, _____,
hereby waives their right to serve as named personal representative for the estate of the above named decedent.

Date

Signature

Street Address

City State Zip Code

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

_____ No. _____
Deceased

**RENUNCIATION OF RIGHT TO ADMINISTER AND
NOMINATION OF PERSON TO ADMINISTER**

The undersigned, _____,
hereby renounces the right to administer the estate of the above named decedent.

The undersigned declines to nominate a personal representative

The undersigned nominates _____

whose address is _____

_____ to be appointed personal representative(s) of the above estate.

Date

Signature

Street Address

City State Zip Code

***If requesting the appointment of an independent personal representative, the Consent to Independent Administration form must be completed and filed with this form.**

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

In the matter of

_____ No. _____
Deceased

DESIGNATION OF RESIDENT AGENT

I, _____, residing at _____,
City of _____, State of _____, desiring to serve as
personal representative of the above named decedent, pursuant to Section 473.117 RSMo, hereby appoint
_____ my agent for service of process upon me
within the State of Missouri, concerning said estate.

The undersigned swears that the matters set forth in the foregoing document are true and correct to the best knowledge and belief of the undersigned subject to the penalties of making a false affidavit or declaration.

Dated: _____
Proposed Personal Representative

ACCEPTANCE OF APPOINTMENT AS RESIDENT AGENT

I, _____, residing at _____,
in _____, Missouri, telephone number _____, having
been appointed, pursuant to Section 473.117 RSMo, to act as agent for service of process on and receipt of
notice to _____ within the State of Missouri, concerning the above estate, hereby
acknowledge such appointment and consent to act as such agent and I will accept all service of process brought
against _____, within the State of Missouri.

The undersigned swears that the matters set forth in the foregoing document are true and correct to the best knowledge and belief of the undersigned subject to the penalties of making a false affidavit or declaration.

Dated: _____
Resident Agent

IN THE PROBATE DIVISION, CIRCUIT COURT, ST. LOUIS COUNTY, MISSOURI

Estate of _____

No. _____

Bond \$ _____

Deceased

**CORPORATE SURETY BOND
(Personal Representative's Bond)**

_____ as principal(s) and _____

as surety are held and firmly bound to the State of Missouri, to the use of all persons interested in the estate, and for the security and benefit of such persons in the sum of \$ _____ for the payment of which we bind ourselves, our heirs, our personal representatives and assigns, jointly and severally.

The condition of the bond is that if _____, personal representative(s), shall faithfully administer the estate, account for, pay and deliver all moneys and property of the estate and perform all other things touching the administration as required by law, or the order of decree of any court having jurisdiction, then the above bond is void, otherwise to remain in full force.

IN WITNESS WHEREOF, we have hereunto subscribed our names this _____ day of _____, _____.

Principal's Signature

Principal's Signature

Street Address

Street Address

City State Zip Code

City State Zip Code

Principal's Signature

Principal's Signature

Street Address

Street Address

City State Zip Code

City State Zip Code

Approved this _____ day of _____, _____.

JOAN M. GILMER, CIRCUIT CLERK

Probate Division, Circuit Court
St. Louis County, Missouri

By: _____
Deputy Clerk

By: _____
Attorney in fact
(Surety Seal)

