

**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**



FOR CLERK'S USE ONLY

PROBATE COVER SHEET

Case Number: _____

A person needing a guardian or conservator is the "ward." A person who died is the "decedent."

Name(s) of the Ward(s), Decedent(s), Trust(s), or Individual(s):

- 1. _____
- 2. _____
- 3. _____
- 4. _____

The person who is filing this case is the "petitioner."

Name(s), Address(es), Telephone Number(s), and Email Address(es) of the Petitioner(s):

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Information About Petitioner's Attorney:

Petitioner is not represented by an attorney, or

Name: _____

BAR #: _____

Telephone: _____

Email: _____

An Interpreter is needed for this language: _____
(List Name(s) of) Person(s) who need interpreter:

Name: _____

Name: _____

Name: _____

STAFF USE ONLY: REASON FEES NOT PAID: Government Charge Deferred Waived

NATURE OF ACTION: Place an "X" next to number which describes the nature of the case. Check only one.

200 ESTATE

- 201 Formal Appointment of Personal Representative
- 202 Informal Appointment of Personal Representative
- 203 Ancillary Administration
- 204 Affidavit of Succession to Realty

- 205 Trust Administration

- 206 Formal Probate of Will
- 207 Informal Probate of Will
- 208 Proof of Authority
- 210 Other _____
Specify
- 211 Single Transaction/Limited Conservatorship
- 212 Foreign Domiciliary

220 CONSERVATOR

- 221 Minor
- 222 Adult Incapacitated Person

230 GUARDIANSHIP

- 231 Minor
- 232 Adult (including those with Dementia, Alzheimer's)
- 233 Adult Requiring Inpatient Psychiatric Treatment

240 GUARDIANSHIP-CONSERVATOR COMBINATION

- 241 Minor
- 242 Adult (including those with Dementia, Alzheimer's)
- 243 Adult Requiring Inpatient Psychiatric Treatment

250 PUBLIC HEALTH

- 251 Petition for Court Ordered Isolation or Quarantine
- 252 Application for Order to Show Cause Re: Release from Isolation or Quarantine
- 253 Petition for Court Hearing Re: Conditions or Treatment During Isolation or Quarantine
- 254 Application for Order for Disclosure of Communicable Disease Information
- 255 Miscellaneous

Today's Date: _____

Signature of Petitioner or Petitioner's Attorney

Notice: Submit this form with new cases only. If there is already a (Maricopa County) Probate Court case number and you are filing in an existing Superior Court case in Maricopa County, do not submit this form.