IN THE COURT OF COMMON PLEAS OF UNION COUNTY, OHIO PROBATE DIVISION

JUDGE RICK RODGER

ESTATE OF	, DECEASED			
CASE NO.	_			
APPLICATION	N TO REOPEN ESTATE			
Applicant hereby requests that this Coul	t reopen the Estate of the above-named Decedent, ar			
action designated as a <code>[MARK ONE]</code> \square Full Adı	ministration \square Release from Administration \square Summary			
Release from Administration, and previously	closed on [DATE], for			
the following reason(s):				
☐ To report newly discovered asset(s) [DES	SCRIBE NATURE AND VALUE]:			
	□ See Attached Exhibit			
☐ Litigation or claims in favor of or agains	t the Estate are pending [SPECIFY THE COURT, CASE NUMBER			
	□ See Attached Exhibit			
☐ Other [DESCRIBE]:				
As to the Applicant's position, the Applica	nt states:			
	administration, and the Applicant is [MARK ONE]: the Estate. named in Decedent's Will.			
 □ The prior Estate proceeding was a reli □ the Applicant was the prior Commis □ the Applicant was not the prior Commis 				
☐ The prior Estate proceeding was sumr	narily released from administration by the			

undersigned Applicant.

2.	As to the Fiduciary's Bond , Applicant states [MARK ONE]:						
	 □ The Decedent's Will dispensed with bond. □ A bond is not required by law. □ Applicant offers a Bond (filed herewith) in the amount of \$ 						
3.	The Applicant requests the Court to appoint the Applicant to serve as [MARK ONE]:						
	□ Executor□ Administrator□ Commissioner		• •				
4.	The Applicant requests the Court designate the reopened Estate as a [MARK ONE]:						
	Applicant accepts the duties of Fiduciary of the Estate imposed by law, and such additional duties						
as	as may be required by the Court. Applicant acknowledges being subject to removal as Fiduciary for						
fail	lure to perform such duties as	required and a	acknowledges be	eing subject to crimina	al penalties for		
			·				
Signature of Attorney for Applicant Attorney Typed or Printed Name			Signature of Applicant				
			Applicant Typed or Printed Name				
Attorney Address			Applicant Address				
City	y State	Zip	City	State	Zip		
Attorney Telephone Number (include area code)			Applicant Telephone Number (include area code)				
Attorney Email Address			Applicant Email Address				
			☐ Applican	☐ Applicant is not represented by legal counsel.			
Atto	orney Registration No.		• •		-		

Case No. _____