

(TYPE OR PRINT IN BLACK INK)

STATE OF NORTH CAROLINA

_____ County

File No.

In The General Court Of Justice
Superior Court Division
Before The Clerk

IN THE MATTER OF THE ESTATE OF:

Name And Address Of Minor

Social Security No. (Last Four Digits)

Age

Date Of Birth

County Of Residence Of Minor

Name And Street Address, PO Box, City, State And Zip Of Applicant 1

County Of Residence Of Applicant 1

Telephone No.

Applicant(s)'s Relationship Or Interest In Proceeding

APPLICATION FOR APPOINTMENT OF

GUARDIAN OF THE ESTATE

GUARDIAN OF THE PERSON

GENERAL GUARDIAN

FOR A MINOR

G.S. 35A-1221, 35A-1225

Name And Street Address, PO Box, City, State And Zip Of Applicant 2

County Of Residence Of Applicant 2

Telephone No.

Name And Address Of Attorney For Applicant(s)

Telephone No.

The undersigned, being duly sworn, applies to be appointed guardian(s) for the minor named above, to serve in the capacity indicated, and in support of this Application state(s):

1. The minor resides or is domiciled in this county.
2. The parents of the minor are listed below. (Attach copy(ies) of death certificate(s) if parent(s) not living.)

Name Of Mother, And Address If Living

Name Of Father, And Address If Living

Date Of Death, If Not Living

County Of Estate Administration

Date Of Death, If Not Living

County Of Estate Administration

3. Other persons known to have an interest in this proceeding are:

Name And Address

Name And Address

Relationship To Minor Or Interest In Proceeding

Relationship To Minor Or Interest In Proceeding

4. If applicable in the proceeding identified below custody of the minor was awarded a guardian of the minor was appointed the Last Will and Testament of the minor's parent(s), recommending the applicant(s) as guardian(s) for the minor, was admitted to probate. (Attach copy of custody or guardianship order or probated will, if available.)

Date Of Order Or Probate

County Of Proceeding

Name And Address Of Custodian Or Guardian, If Any

File Or Other Identification No.

5. The reason for seeking a guardian, and information concerning the need, type and person(s) to appoint are:

6. A statement of the assets and liabilities of the minor, including any income and receivables to which the minor is entitled, is set forth on the reverse side of this Application.
7. I hereby acknowledge receipt of the AOC-SP-850, "Responsibilities Of Guardians In North Carolina" or I acknowledge that said pamphlet is available online at www.nccourts.org/forms and I further acknowledge that I am required to comply with said responsibilities and to manage the guardianship estate in accordance with North Carolina law.

PART I. PROPERTY OF MINOR'S ESTATE			PART II. OTHER PROPERTY		
Description		Estimated Value	Description		Estimated Value
1. Insurance Proceeds		\$	1. Right Of Action For Injury, Etc. (NOTE: Increase bond before receipt.)		\$
2. Injury Settlements			2. Interests In Real Property		
3. Cash And Uncashed Checks On Hand			3. Custodial Accounts, Trust Income Or Other Resources Available For Support Of Minor, NOT Administered Or Received By Guardian (Attach itemized list)		
4. Accounts			TOTAL PART II. ▶		\$
5. Stocks And Bonds					
6. Farm Products, Livestock And Equipment			Custodian, Trustee, Attorney-in-fact, Etc. (Name) _____ Major medical or similar insurance is in effect through: (Name Of Insurer) _____ (Policy No.) _____		
7. Miscellaneous Personal Property					
8. Estimated Annual Income		\$			
Interest And Dividends, Etc.....					
Rental Income.....					
Annuity, Pension Or Retirement Benefits, Social Security, Disability Or Other Compensation, Insurance Proceeds, Injury Settlement Or Other Periodic Payments.....			PART III. LIABILITIES		
Subtotal Of Line 8		\$	1. Mortgage Loans		\$
9. Other			2. Other Secured Loans Or Obligations		
TOTAL PART I. (base bond on this amount) ▶		\$	3. Unsecured Obligations		
			4. Other		
			TOTAL PART III. ▶		\$

VERIFICATION

I, the undersigned applicant, have read this Application and state that its contents are true to my own knowledge except those matters stated on information and belief, which I believe to be true.

Date	Signature Of Applicant 1		Date	Signature Of Applicant 2	
SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME			SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME		
Date	Signature Of Person Authorized To Administer Oaths		Date	Signature Of Person Authorized To Administer Oaths	
Title			Title		
SEAL	Date Commission Expires	County Where Notarized	County Where Notarized	Date Commission Expires	SEAL

WAIVER OF NOTICE/CONSENT TO GUARDIANSHIP

Each of the undersigned hereby waives notice of a hearing on this Application and consents to the appointment of the applicant(s) as guardian(s) for the minor to serve in the capacity indicated.

Date	Signature		Date	Signature	
Name Of Applicant 1 (Type Or Print)			Name Of Applicant 2 (Type Or Print)		
Relationship To Minor <input type="checkbox"/> Parent <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian			Relationship To Minor <input type="checkbox"/> Parent <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian		
SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME			SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME		
Date	Signature Of Person Authorized To Administer Oaths		Date	Signature Of Person Authorized To Administer Oaths	
Title			Title		
SEAL	Date Commission Expires	County Where Notarized	County Where Notarized	Date Commission Expires	SEAL

NOTE: A copy of this Application and written notice of the time, date and place set for a hearing, shall be served on any parent, guardian or legal custodian of the minor who is not an applicant and who does not sign the waiver and consent above, and any other person the Clerk may direct, including the minor. Service shall be as provided by Rule 4 of the Rules of Civil Procedure unless the Clerk directs otherwise. G.S. 35A-1222.