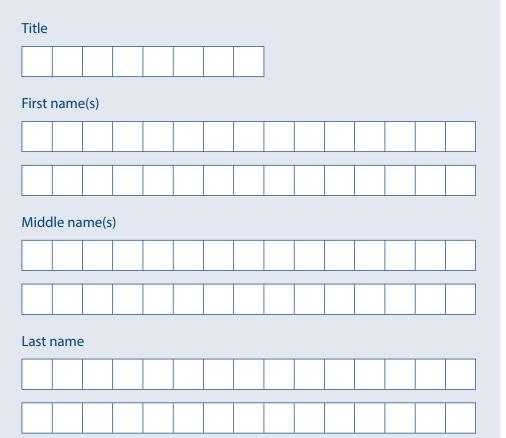
| person w | e application is for an application where the who has died did not leave a will s with assets in England and Wales | If you need help filling out this form please call the Probate Helpline 0300 123 1072 We cannot provide legal advice |
|---|---|--|
| you will need to enclo If you do not enclose | you send your application form to HMCTS Probate ose the following. This checklist must be completed. all of the required documents it will delay your eep copies of all documents that you send. | Did you know you can apply for Probate online? Go to www.gov.uk/wills- probate-inheritance/appyling- for-a-grant-of-representation |
| PA1A - Probate Ap | pplication (this form) | |
| | Immary Form: Please submit the appropriate form , and IHT217 if applicable), signed by all applicants tes in Section 6). | |
| | ign wills or any wills dealing with assets held outside s (and if not in English, an English translation). | |
| | ot a photocopy) of the death certificate, or a coroner's of the person who has died. | |
| Any other docume | ents requested on this form. Please list them: | |
| Grant of Represen How many official | lication fee, there is a fee for each official copy of the tation that we provide. copies of the Grant of Representation do you the United Kingdom? | |
| | copies of the Grant of Representation do you tside of the United Kingdom? | |
| Application fee | £ | |
| Fees for copies | £ | |
| Total fees | £ | Details of how to pay by debit |
| | rd. (This payment must be made before you send your ne payment reference entered in the box below.) e | or credit card can be found at www.gov.uk/wills-probate- inheritance/applying-for-a- grant-of-representation |
| | rder payable to ' HMCTS ' in respect of HMCTS's fees. Please the person who has died on the back of the cheque. | Please send your form and required documents with payment to HMCTS Probate, PO Box 12625, Harlow, CM20 |

9QE.

SECTION A – PERSONAL INFORMATION

- 1. About the applicant(s) All applicants must be over 18 years and a maximum of 4 may apply
- 1.1 Title and full name including middle names of first applicant



1.2 Your address

Building and street

Second line of address

Town or city

County (optional)

Postcode



Please complete in BLOCK capitals placing a tick in boxes where applicable.

Note 1.1 -

all correspondence, including the Grant of Representation, will be sent to the first applicant named in this section.

Only list applicants who wish to be named on the grant in this section and they will be required to sign this document. Please note that the names you provide here must match the names provided on your formal ID. E.g. passport or Driving licence.

Where there are persons aged under 18 benefiting from the estate then two applicants (or at least two) will be needed in Section A. You may wish to contact HMCTS Probate to seek information in regard to who is eligible to apply.

| | | | | | | | | | | | |] | | |
|-------|-------|-----------|--------|-------|----------|--------|-------|-----|----------|----------|------|------|---|---|
| You | r mob | ile/w | ork te | eleph | one | numł | ber | | | | | | | |
| | | | | | | | | | | | |] | | |
| | | 1 | | | <u>.</u> | I | 1 | | | | | 1 | | |
| You | r ema | il add | ress | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | Note 1.5 – we will contac |
| | | | | | | | | | | | | | | you with any queries via this email address. |
| | | | | | | | | | | | | | | We aim to contact you wit |
| Title | | | | | l: | الماد: | | | | | I | | | 10 working days of receip your application. |
| litle | and f | uli na | ime I | nciuc | ing r | niaa | le na | mes | ot see | cona | аррі | Ican | | |
| Title | ! | | | | | | | _ | | | | | | |
| | | | | | | | | | | | | | | |
| First | name | - -(s) | | | | | | - | | | | | | |
| | | | | | | | | | | | | | | 1 |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | dlana | mole |) | | | | , | | | | | | , | - |
| Mid | | |) | | | | | | | | 1 | | | 1 |
| Mid | | | | | | | | | | | | | | |
| Mid | | | | | | | | | | | | | |] |
| Mid | | | | | | | | | | | | | L | |
| | | | | | | | | | | <u> </u> | , | | | |
| | name | 2 | | | | | | | <u> </u> | | | 1 | 1 | , |
| | name | 2 | | | | | | | | | | | |] |
| | name | 2 | | | | | | | | | | | | |

1.7 Their address

Building and street

Second line of address

Town or city

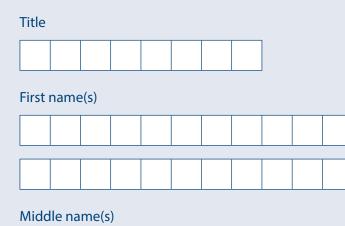
County (optional)

Postcode



1.8 Their email address

1.9 Title and full name including middle names of third applicant



Last name

1.10 Their address

Building and street

Second line of address

Town or city

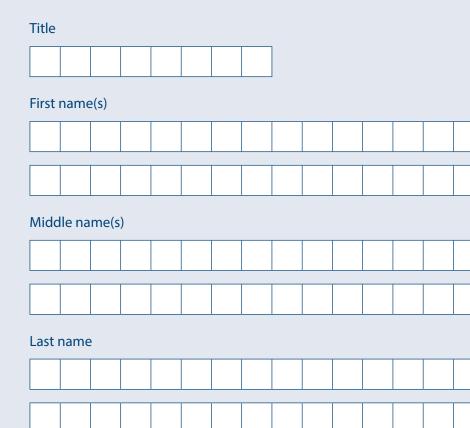
County (optional)

Postcode



1.11 Their email address

1.12 Title and full name including middle names of fourth applicant



1.13 Their address

Building and street

Second line of address

Town or city

County (optional)

Postcode

| 1 | 1 | 1 | | |
|---|---|---|--|--|
| | | | | |

1.14 Their email address

SECTION B

The information you provide in this section of the application form will be the basis of your statement of truth, and it will be stored as a public record.

2. About the person who has died

- **2.1** Forename(s) (including all middle names) as they appear on the Death Certificate
- 2.2 Surname as it appears on the Death Certificate

2.3 Permanent address

Building and street

Second line of address

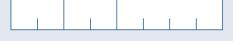
Town or city

County (optional)

Postcode



2.4 Date they were born



2.5 Date they died

2.6 Was the person who has died known by any other name in which they held assets?

Yes, go to question 2.7

No, go to question 2.8

If you need help filling out this form please call the

Probate Helpline 0300 123 1072

We cannot provide legal advice

2.7 Please give the details of any other names by which the person who has died held assets.

| | Full name | the grant because an asset is in that name. We do not need to know the asset. |
|-----|---|--|
| 2.8 | Did the person who died live permanently in England and Wales at the date of death, or intend to return to England and Wales to live permanently? (For legal purposes this generally means they were domiciled in England and Wales. You may wish to seek legal advice about this.) Yes No | Note 2.8 – Living permanently means they had either their permanent or principal home in England and Wales at the date of death or they intended to return to England and Wales to live permanently. |
| 2.9 | Was the person who has died or any of their relatives legally adopted in or out of the family? Yes, see note 2.9 No, go to question 2.11 | Note 2.9 – If you answered Yes to this question we may require additional information to be submitted once we have received your application. |

2.10 Please name the legally adopted relatives and give their relationship to the person who has died. Please state whether they were adopted into the family of the person who has died, or 'adopted out' (become part of someone else's family).

| Name | Relationship | Adopted in or out |
|------|--------------|------------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

Note 2.7 – These names must be ones that will appear on sset is ot need

8

| 2.11 What was the marital status of the person who has died when they died? Never married Widowed, their lawful spouse or civil partner having died before them Married/in a civil partnership - give date Divorced/civil partnership is dissolved - give date Judicially separated - give date Judicially separated - give date Yhat is the name of the court where the Decree Absolute, Decree of Dissolution of Partnership or Decree of Judicial Separation was issued? 2.13 Did the person who has died own any foreign assets? | Note 2.11 – a civil partnership is a same-sex relationship that has been registered in accordance with the Civil Partnership Act 2004. A marriage is a legal ceremony conducted in UK under the Marriage Acts 1949, 1994 and The Marriage (Same Sex Marriage) Act 2013 or under legislation in any other country by the law applicable there. Date of divorce - this date is on their Decree Absolute, Decree of Dissolution of Partnership or Decree of Judicial Separation. You can get an official copy of these documents from the court that issued them, or from The Divorce Absolute Search Section, Central Family Court, 42–49 High Holborn, London WC1V 6NP. |
|--|---|
| Yes, the total value of their foreign assets (not including houses or land) £ No 2.14 Was there any land vested in the person who has died which was settled previously to their death and which remained settled land not withstanding their death? Yes | Note 2.14 – It is rare for estates to be subject to the provisions of the Settled Land Act 1925 but if you know this applies or have any queries please seek legal |

No

ut e any queri ек і y advice.

3. Relatives of the person who has died

3.1 Did the person who has died leave a surviving lawful spouse or civil partner?

| Yes |
|-----|
| |

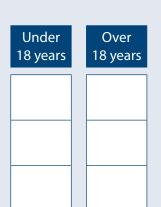
No

- **3.2** How many of the following blood and adoptive relatives did the person who has died have?
 - **a** How many sons or daughters of the person who died survived them?
 - **b** How many sons or daughters of the person who has died who did not survive them?
 - **c** How many children of people at 'b' who survived them?

Please confirm that if any of the applicants are grandchildren of the deceased (3.2c) that their parent is one of the persons referred to at 3.2b. If they are not then they are not able to apply.

Yes

If you have entered details in any of the boxes above go to Q3.5. If not then proceed to question 3.3



Note 3.1 – 'survive' means that they were alive when the deceased person died.

Note 3.2 – Please state the **number** of relatives the person who has died had in the relevant sections. If none then put nil or strike through. If you are unsure about the relationships of the persons applying then contact HMCTS Probate.

Note – Depending on the value of the net estate the lawful spouse/civil partner may not be the only person entitled to the estate of the deceased. Please seek legal advice regarding the distribution of the estate.

All relatives from the same category as the applicant are entitled to share in the estate including children/issue of any who have predeceased. You should seek legal advice regarding distribution of the estate if you are in any doubt. **3.3** How many of the following blood and adoptive relatives did the person who has died have?

If you have filled in details in any of the sections in question 3.2, then go to question 3.5

| | | Under 18 years | Over 18 years | |
|---|---|-------------------|------------------|--|
| d | How many parents of the person who has died survived them? | | | |
| e | How many Whole-blood brothers or sisters of the person who has died survived them? | | | |
| f | How many Whole-blood brothers or sisters of the person who has died did not survive them? | | | |
| g | How many Children of people at section (f) survived them? | | | |
| h | How many Half-blood brothers or sisters of the person who has died survived them? | | | |
| i | How many Half-blood brothers or sisters of the person who has died did not survive them? | | | |
| j | How many Children of people at section (i) survived them? | | | |

Please confirm that if any of the applicants are nephews or neices of the whole or half blood of the deceased (questions 3.3g and 3.3j) that their parent is one of the persons referred to at 3.3f or 3.3i. If they are not then they are not able to apply.

Yes

If you have entered details in any of the boxes above go to Q3.5. If not then go to question 3.4.

Note 3.3 – Once you have entered a number in one of the block sections (e.g. d to j) you should go to question 3.5.

Step-relatives should not be included.

A '**whole-blood**' brother or sister is someone who has both parents in common with person who has died, or someone who was legally adopted by both of the parents of the person who has died.

A '**half-blood**' brother or sister is someone who has only one parent in common with the person who has died, or someone who was legally adopted by only one of the parents of the person who has died. **3.4** How many of the following blood and adoptive relatives did the person who has died have?

If you have filled in details in any of the sections in question 3.3, then go to question 3.5.

| | | Under 18 years | Over 18 years |
|---|---|-------------------|------------------|
| a | How many Grandparents of the person who has died survived them? | | |
| b | How many Whole-blood uncles or aunts of the person who has died survived them? | | |
| c | How many Whole-blood uncles or aunts of the person who has died did not survive them? | | |
| d | How many Children of people at 3.4c who survived them? | | |
| е | How many Half-blood uncles or aunts of the person who has died survived them? | | |
| f | How many Half-blood uncles or aunts of the person who has died did not survived them? | | |
| g | How many Children of people at 3.4f who survived them? | | |

Please confirm that if any of the applicants are cousins of the whole or half blood of the deceased (questions 3.4d and 3.4g) and that their parent is one of the persons referred to at 3.4c or 3.4f. If they are not then they are not able to apply.

Yes

3.5. Please state the relationship of each of the persons applying for the grant to the person who has died. (If you are applying as an attorney for someone then please state attorney)

Relationship description

| First applicant |
|------------------|
| |
| Second applicant |
| |
| Third applicant |
| |
| Fourth applicant |
| |

Note 3.4 – this section should only be completed if no relatives have been entered in section 3.3. Please state the number of relatives the person who has died had in the relevant sections. If none then put nil or strike through.

Step-relatives and people who were related to the person who has died only by marriage should not be included.

A '**whole-blood**' uncle or aunt is someone who has both parents in common with the mother or father of the person who has died, or someone who was legally adopted by the maternal or paternal grandparents of the person who has died.

A '**half-blood**' uncle or aunt is someone who has only one parent in common with the mother or father of the person who has died or someone who was legally adopted by only one of the grandparents of the person who has died.

4. Applying as an attorney

4.1 Are you applying as an attorney on behalf of one or more people who are entitled to apply for a Grant of Representation? **Please read Note 4 before proceeding.**

Yes, go to question 4.2

No, go to section 5

4.2 Please give the full names of the person or people on whose behalf you are applying and their relationship to the person who has died.

4.3 Please give their address

Building and street

Second line of address

Town or city

County (optional)

Postcode

4.4 Is a person on whose behalf you are applying unable to make a decision for themselves due to an impairment of or a disturbance in the functioning of their mind or brain?

Yes, further confirmation of this will be requested by the Probate Registry.No

4.5 Has anyone been appointed by the Court of Protection to act on behalf of a person on whose behalf you are applying including the right to apply for a grant of representation?

Yes, please provide an official copy of the court order with your application

No

Note 4 – if you are applying on behalf of more than one person, please provide the information requested in this section for the other people you represent on a separate sheet of paper. We will need to send you a further form for the person who is appointing you as their attorney to sign.

Please visit GOV.UK (gov.uk/ wills-probate-inheritance/ if-youre-an-executor) to print off the PA12 attorney form or call 0117 9302430 and quote 'Attorney' and we will send the attorney form.

You will need to send the attorney form to us with this application.

Where there are persons aged under 18 benefiting from the estate then two applicants (or at least two) will be needed in Section A. You may wish to contact HMCTS Probate to seek information in regard to who is eligible to apply.

Note 4.4 – this applies if they lack capacity under the Mental Capacity Act 2005 and are incapable of managing their property and financial affairs. You may wish to seek legal advice about this.

In some cases you may be asked to provide medical evidence. If you do not already have medical evidence from a qualified practitioner or are using a registered LPA a short form of medical evidence will be required.

Please visit GOV.UK (gov.uk/ wills-probate-inheritance/ if-youre-an-executor) to print off the PA14 medical certifgicate or call 0117 9302430 and quote 'medical evidence' and we will send the form.

| 4.6 | Has a person on whose behalf you are applying appointed an attorney under an Enduring Power of Attorney (EPA) or a Property and Financial Affairs Lasting Power of Attorney (LPA)? | Note 4.6 – an LPA must be registered with the Office of the Public Guardian before it can be used. |
|-----|--|--|
| | of it certified on every page.) with your application No, go to Section 6 | |
| 4.7 | Has the Enduring Power of Attorney (EPA) been registered with the Office of the Public Guardian? | |
| | Yes | |
| | No | |
| 4.7 | No, go to Section 6 Has the Enduring Power of Attorney (EPA) been registered with the Office of the Public Guardian? Yes | |

5. Foreign domicile

Note – if you answered Yes, to question 2.8 you don't need to complete this section – please go to Section 6.

- **5.1** What was the country where the person who died either lived permanently at the date of death or intended to return to live permanently?
- **5.2** What does the estate in England and Wales of the person who has died consist of?

| Assets | | Values |
|--|------------------------------|---------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Has an entrusting document been issued by the court where the person who | | |
| has died was domiciled? | Note 5.3 and documents r | nay help to |
| Yes, please provide the official document with your application; if it is not in English, please also provide an official translation. | support you If you do not | r application. : have any of |
| Go to Section 6. | these docum | nents, you may legal advice. |
| No | | |

5.4 Has a succession certificate, inheritance certificate or equivalent document been issued by a court or Notary in the country of domicile of the person who has died?

Yes, please provide the official document with your application; if it is not in English, please also provide an official translation.

No

5.3

6. Inheritance tax

| 6.1 | Did y | ou complete an Inheritance Tax Estate report online? |
|-----|-------|--|
| | | |

| Yes, do not submit an Inheritance Tax form with this application |
|--|
| Please provide the following details, then go to Legal Statement |

| IHT Identifier | |
|---------------------|---|
| Gross Estate Figure | £ |
| Net Estate Figure | £ |

Note 6 – if you completed an Inheritance Tax Summary online, and fully complete question 6.1 of this form, you do not need to send an Inheritance Tax Estate report form with your application.

For guidance on probate fees please visit www. gov.uk/wills-probateinheritance/

- No, go to question 6.2
- 6.2 Which of the following inheritance tax forms have you completed?
 - Form IHT205, complete 6.3 then go to Legal Statement
 - Form IHT207, complete 6.4 then go to Legal Statement

Forms IHT400 and IHT421, complete 6.5 then go to Legal Statement

6.3 Provide the following figures from form IHT205.

| Figure from box D | £ | |
|--|---|--|
| Figure from box F | £ | |
| (This figure will determine the probate application fee) | | |

6.4 Provide the following figures from form **IHT207**.

| Figure from box A | £ | |
|---|---|--|
| Figure from box H | £ | |
| (This figure will determine the probate application fee) | | |

6.5 Provide the following figures from form IHT421.

| Figure from box 3 (Gross value of assets) | £ |
|--|---|
| Figure from box 5 (Net value) | £ |

(This figure will determine the probate application fee)

Note 6.2 – if you did not complete an Inheritance Tax Estate report online, you **must** complete IHT205, or IHT207, or both IHT400 and IHT421.

Note 6.3 – if the person who has died, died before 1 September 2006, it may affect which tax form you need to complete, so please ring the **Probate Helpline** on 0300 123 1072.

Note 6.5 – do **not** send form IHT400 or form IHT421 to us. Please send them to HM Revenue and Customs, Inheritance Tax, BX9 1HT, at the same time you send PA1A and other papers to HMCTS Probate. HMRC will stamp your IHT421 and send it to HMCTS Probate.

LEGAL STATEMENT

The undersigned confirms:

- to collect the whole estate
- to keep full details (an inventory) of the estate
- to keep a full account of how the estate has been distributed

If the Probate Registry (court) asks the undersigned they will:

- Provide the full details of the estate and how it has been distributed
- Return the grant of representation to the court

and understand that:

- The application will be rejected if the information is not provided (if asked)
- Criminal proceedings for fraud may be brought against the undersigned if it is found that the evidence provided is deliberately untruthful or dishonest

The undersigned confirm to administer the estate of the person who has died in accordance to law, and that the application is truthful.

PLEASE MAKE SURE THAT ALL PERSONS APPLYING FOR THE GRANT SIGN THE DECLARATION BELOW.

| Name of first applicant | Name of second applicant |
|--------------------------------|---------------------------------|
| Signature | Signature |
| Date signed | Date signed |
| Name of third applicant | Name of fourth applicant |
| Signature | Signature |
| Date signed | Date signed |

Please send the original form signed by all applicants and required documents with payment to: HMCTS Probate, PO Box 12625, Harlow, CM20 9QE

Phone 0300 303 0648 Email contactprobate@justice.gov.uk

FOR OFFICE USE ONLY

| How are the applicants entitled to apply |
|--|
|--|

In what capacity are the persons applying entitled to apply?

| The undersigned is the wife or husband or civil partner of the person who has died |
|---|
| The undersigned is or are the child/children of the person who has died |
| The undersigned is or are the grandchild/grandchildren of the person who has died being the son or daughter of a child who died in the lifetime of the person who has died. |
| The undersigned is or are the parent/parents of the person who has died |
| The undersigned is or are the brother(s) or sister (s) of of the whole/half blood of the person who has died |
| The undersigned is or are the niece/nephew (s) of the whole/half blood of the person who has died being the son or daughter of a brother or sister of the person who has died who died in their lifetime. |
| Other (Please state in the box below the reason they are applying) |
| |