

**STATE OF MICHIGAN
PROBATE COURT
COUNTY OF**

**PETITION REGARDING
REAL ESTATE/DWELLING**

FILE NO.

NOTE: Do not use this form in decedent's estates.

Estate of _____
First, middle, and last name

1. I am the _____ of this estate.
Specify conservator or guardian

2. I intend to sell dispose of mortgage pledge cause a lien to be placed on
the protected individual's principal dwelling, real property, or interest in real property described as follows (provide legal description
or VIN number of titled property):

for the purpose of _____

to _____ for \$ _____ on the following
Name (type or print)

terms and conditions: _____

3. The current state equalized value of the titled property is \$ _____. Attached is a copy of the most
recent assessor's statement or tax statement. The following are outstanding liens:

Mortgage(s): \$ _____ Taxes: \$ _____ Other: \$ _____

4. It is in the protected individual's best interests to grant this petition for the following reasons: _____

5. The value of the remaining personal property is \$ _____ and the real property is \$ _____ .

The amount of unpaid debts and taxes is \$ _____. The fiduciary is currently bonded for a total amount of
\$ _____ .

6. The protected individual's monthly income is \$ _____ and monthly expenses are \$ _____ .

(SEE SECOND PAGE)

USE NOTE: If this form is being filed in the circuit court family division, please enter the court name and county in the upper left-hand corner of the form.

Do not write below this line - For court use only

Bond is set at \$ _____ .

Date: _____

Authorized signature: _____

7. The interested parties, their addresses, and their representatives are identical to those appearing on the initial petition except as follows: (For each person whose address changed, list the name and new address; attach separate sheet if necessary.)

8. I **request** that the court approve the sale of disposal of mortgage on pledge of placement of lien on the property described above and determine whether a bond needs to be filed.

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Attorney signature

Date

Attorney name (type or print)

Signature

Address

Address

City, state, zip

Telephone no.

City, state, zip

Telephone no.