



FLORENCE COUNTY PROBATE COURT
181 N. IRBY STREET, SUITE 1300
FLORENCE, SC 29501
Telephone: (843) 665-3085
Facsimile: (843) 665-3068

SMALL ESTATE PROCEEDING

The Small Estate proceeding allows for the transfer of the Decedent's personal property with a value less than \$45,000.00. This cannot be used if the Decedent owns any interest in real property. The Affidavit for Collection of Personal Property pursuant to Small Estate Proceeding cannot be filed until **30 days** after the death of the Decedent. Below are the instructions on how to fill out the form.

The following items must be submitted to Florence County Probate:

- Affidavit for Collection for Personal Property (Form 420ES) Completed, signed & notarized
- Picture ID
- Proof of Assets in Decedent's name: Bank Statements/refund checks/vehicle titles/etc.
- Original Death Certificate
- Obituary or Funeral Home Program
- Paid or Itemized Funeral Bill
- Affidavit of Reimbursement for Funeral Bill (if applicable)

<u>Probate Fees</u>	<u>Value of Estate Property</u>
\$12.50	Under \$100.00
\$25.00	\$101.00 to \$4,999.99
\$45.00	\$5,000.00 to \$19,999.99
\$67.50	\$20,000.00 to \$45,000.00

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Instructions on how to fill out the Small Estate. When you see this (*). You must fill out that section.

1. Decedent's Full Legal name, Date of Birth, Date of Death and age at Death.
2. Decedent's info:
 - a. Mark (A) if the decedent resided in Florence County along with complete address
 - b. Mark (B) if the decedent did not reside in SC, but has property in Florence County
3. #6, Fill out what asset you are needing to probate (Bank Account/Stock/Unclaimed Property/Life Insurance/Mobile Home/Motor Vehicle/ Boat/Motor/Trailer (Must have all information completed in full)
4. Verification-Asset Page - This is to be filled out by the person who is filing the small estate. We must have all the information requested.
5. Successor/Heir's Page-This page is where you put all who should inherit. You must have their name, address, year of birth, relationship and percentage interest/amount. This must be filled out completely and if it is not, it will be given back. If you need more pages, please get them from the Probate Court.

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NOTE: IT COULD TAKE UP TO 48 HOURS TO PROCESS THE SMALL ESTATE.



State of South Carolina

In the Probate Court

County of Florence

ES-21-

* In the Matter of: _____
Decedent's Name

Case No. -

**Affidavit for Collection of Personal Property
Pursuant to Small Estate Proceeding**

The undersigned states as follows:

- * 1. Decedent's Information:
- Full Legal Name (including all known names): _____
Full Legal Name of Decedent
- Date of Birth: _____
Decedent's Date of Birth
- Date of Death: _____
Decedent's Date of Death
- Age at Date of Death: _____
Decedent's Age at Date of Death

- * 2. Select one:
- a. ☐ Decedent was domiciled in this county at the date of death:
- Address: _____
- | | | | | |
|---------|----------------|-------------------------|-------|----------|
| | | | SC | |
| | | | State | Zip Code |
| County: | Florence | Decedent's Full Address | City | |
| State: | South Carolina | | | |
- b. ☐ Decedent was not domiciled in South Carolina, but the probate property of Decedent was in this county at the date of death at:

Address: _____

	Decedent's Full Address	City	State	Zip Code
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County: _____
County Where Decedent's Property is Located

State: _____

If the above address is the address of a nursing home, prison, or other residential facility, please give the last address of the Decedent before entering facility:

[Fill in Last Address of the Decedent Before Entering a Facility]

3. More than thirty (30) days have passed since the Decedent's death.



4. No Application or Petition for the appointment of a Personal Representative is pending or has been granted in any jurisdiction.
5. This affidavit is pursuant to SCPC § 62-3-1201. The successor(s) named herein is/are entitled to the payment of any sums of money due and owing to the Decedent, and to the delivery of all probate tangible personal property belonging to the Decedent and in the possession of another, and to the delivery of all instruments evidencing a debt, obligation, stock, or chose in action belonging to the Decedent in the following proportions. Names and addresses of the Decedent's successors (Example: heirs or devisees) are:

*** SEE ATTACHED LIST FOR SUCCESSORS**

(For this purpose, successors include any person(s) who has/have paid reasonable funeral expenses; attach proof of payment.)

6. The value of the entire probate estate wherever located, less liens and encumbrances, does not exceed Forty-Five Thousand Dollars (\$45,000.00) and does not include any interest in real property as indicated below:

*** SEE ATTACHED ASSET LIST**

☐ See attached sheet for additional assets/encumbrances (check if applicable)

*** VERIFICATION**

The undersigned, being sworn, states: That the facts set forth in the foregoing statements are true to the best of the undersigned's knowledge, information and belief; and the undersigned hereby submits to the Court's jurisdiction in this matter.

PLEASE PRINT OR TYPE

Affiant Signature:

Signature

Print Name:

Print Name

Address:

Complete Address

City

State

Zip Code

Telephone (Work):

Telephone (Work)

Telephone (Home):

Telephone (Home)

Telephone (Cell):

Telephone (Cell)

E-mail:

E-mail of

Relationship to
Decedent / Estate:

Relationship to Decedent / Estate

Sworn to and subscribed before me
this ____ day _____, 20____.

Signature of Notary Public

Printed Name of Notary Public

My Commission expires the _____



**SOUTH CAROLINA
JUDICIAL BRANCH**

* Successor/Heir:
Name of Successor: _____
Address: _____
Year of Birth: _____
Relationship: _____
Percentage Interest/Amount: _____

Name of Successor/Heir
Complete Address City State Zip Code
Year of Birth
Relationship to Decedent
Percentage of Interest/Amount in Estate

* Successor/Heir:
Name of Successor: _____
Address: _____
Year of Birth: _____
Relationship: _____
Percentage Interest/Amount: _____

Name of Successor/Heir
Complete Address City State Zip Code
Year of Birth
Relationship to Decedent
Percentage of Interest/Amount in Estate

* Successor/Heir:
Name of Successor: _____
Address: _____
Year of Birth: _____
Relationship: _____
Percentage Interest/Amount: _____

Name of Successor/Heir
Complete Address City State Zip Code
Year of Birth
Relationship to Decedent
Percentage of Interest/Amount in Estate

* Successor/Heir:
Name of Successor: _____
Address: _____
Year of Birth: _____
Relationship: _____
Percentage Interest/Amount: _____

Name of Successor/Heir
Complete Address City State Zip Code
Year of Birth
Relationship to Decedent
Percentage of Interest/Amount in Estate

* Successor/Heir:
Name of Successor: _____
Address: _____
Year of Birth: _____
Relationship: _____
Percentage Interest/Amount: _____

Name of Successor/Heir
Complete Address City State Zip Code
Year of Birth
Relationship to Decedent
Percentage of Interest/Amount in Estate



ASSET SHEET FOR SMALL ESTATE

Bank Account

Amount (\$): _____
Dollar Amount of Bank Account

Bank Name: _____
Name of the Bank

Type of Account: _____ / _____
Checking / Savings

Stock

Amount (\$): _____
Dollar Amount of Stock(s)

Company Name: _____
Stock Company Name(s)

Number of Shares: _____
Number of Stock Shares

Unclaimed Property

Amount (\$): _____
Dollar Amount of Unclaimed property

From: _____
Unclaimed Property is From

Life Insurance to Estate

Amount (\$): _____
Dollar Amount of Life Insurance to Estate

Company Name: _____
Life Insurance Company Name

Mobile Home

Amount (\$): _____
Dollar Amount of Mobile Home

VIN: _____
VIN of Mobile Home

Year / Make: _____
Year / Make of Mobile Home

Model: _____
Model of the Mobile Home

Motor Vehicle

Amount (\$): _____
Dollar Amount of Motor Vehicle

VIN: _____
VIN of Motor Vehicle

Year / Make: _____
Year / Make of Motor Vehicle

Model: _____
Model of the Motor Vehicle

Boat/Motor/Trailer:

Amount (\$): _____
Dollar Amount of Boat / Motor / Trailer

VIN: _____
VIN of the Boat / Motor / Trailer

Year / Make: _____
Year / make of the Boat / Motor / Trailer

Model: _____
Model of the Boat / Motor / Trailer