

IN THE CIRCUIT COURT IN AND FOR SUMTER COUNTY, FLORIDA

**CHECKLIST FOR DETERMINING HOMESTEAD STATUS OF REAL PROPERTY IN FORMAL AND SUMMARY ADMINISTRATION**

Estate of: \_\_\_\_\_ Case No: \_\_\_\_\_ CP \_\_\_\_\_

Date of Death: \_\_\_\_\_ Attorney of Record: \_\_\_\_\_

Age at Death: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Decedent's Residence as Listed on Death Certificate:

Type of Estate:    Testate ☐    Testate/Trust ☐    Intestate ☐

**NOTE TO COUNSEL:** Please fill out both columns of this checklist completely to assist the court in processing your client's pleading. If you do not provide correct dates in the Date Filed column for each item where a "YES" answer is provided, the checklist will be determined to be incomplete, and the court may deny the petition on that basis.

|    |                                                                                                                                                                                                                                                                                                                                                                      | Attorney Certification                                  |    |     | DATE FILED |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|----|-----|------------|
|    |                                                                                                                                                                                                                                                                                                                                                                      | YES                                                     | NO | N/A |            |
| 1. | Certified Death Certificate Filed?                                                                                                                                                                                                                                                                                                                                   |                                                         |    |     |            |
| 2. | Last Will and Testament                                                                                                                                                                                                                                                                                                                                              |                                                         |    |     |            |
|    | Original Will filed?                                                                                                                                                                                                                                                                                                                                                 |                                                         |    |     |            |
|    | Date of Will: _____<br>Date of Codicil: _____                                                                                                                                                                                                                                                                                                                        | Fill in<br>Information to<br>left                       |    |     |            |
|    | If applicable: Notice of Trust # _____<br>Deposited Will # _____ 732.901<br>Guardianship Case # _____<br>Caveat # _____ 731.110<br>[If caveat has been filed, notify attorney, must serve formal notice on the Caveator before further action can be taken on Petition for Summary 5.260(f); If a creditor-send Notice to Caveator when Letters are issued 5.260(e)] | Fill in<br>Information<br>to the left,<br>if applicable |    |     |            |
|    | If a copy is filed, has a Petition to Establish Lost Will complying with 5.510 & 5.025 and 733.207 been filed?                                                                                                                                                                                                                                                       |                                                         |    |     |            |
|    | Is Will self-proved? 732.503, 733.201<br>If applicable, <input type="checkbox"/> self-proved under law where executed;<br><input type="checkbox"/> authority provided from other state where executed                                                                                                                                                                | If yes, mark<br>boxes on left                           |    |     |            |

|           |                                                                                                                                           | Attorney Certification |           |            | DATE FILED       |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------|------------|------------------|
|           |                                                                                                                                           | YES                    | NO        | N/A        |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           | If not self-proved, is an oath of witness filed? 733.201(2)                                                                               |                        |           |            |                  |
|           | Properly executed? 732.502                                                                                                                |                        |           |            |                  |
|           | If not, proper oath? 733.201(2) / (3)                                                                                                     |                        |           |            |                  |
| <b>3.</b> | <b>Does the Petition for Determining Homestead Status of Real Property Contain the Following Information? FPR 5.405(b)</b>                |                        |           |            |                  |
|           | (1) the date of decedent's death                                                                                                          |                        |           |            |                  |
|           | (2) the county of the decedent's domicile at the time of death;                                                                           |                        |           |            |                  |
|           | (3) the name of the decedent's surviving spouse/descendants; and whether they are minor children, identified with name and year of birth; |                        |           |            |                  |
|           | (4) a Legal description of the property owned and resided on by the decedent;                                                             |                        |           |            |                  |
|           | Whether the real property constituted the protected homestead of the decedent; 5.405(c)                                                   |                        |           |            |                  |
|           | Formal Notice or Consent by interested parties 5.040/5.041                                                                                |                        |           |            |                  |
| <b>4.</b> | <b>List of Beneficiaries:</b>                                                                                                             |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
| <b>5.</b> | <b>List of Creditors:</b>                                                                                                                 |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
|           |                                                                                                                                           |                        |           |            |                  |
| <b>6.</b> | <b>Intestate: F.S.732.401(1)</b>                                                                                                          | <b>YES</b>             | <b>NO</b> | <b>N/A</b> | <b>CONFIRMED</b> |
|           | Does the Proposed Order provide for a Life Estate for Spouse?                                                                             |                        |           |            |                  |
|           | <b>Testate: F.S.732.4015(1)</b> Is there a Surviving Spouse or minor child?                                                               | <b>YES</b>             | <b>NO</b> | <b>N/A</b> | <b>CONFIRMED</b> |
|           |                                                                                                                                           |                        |           |            |                  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Attorney Certification                     |    |     | DATE FILED |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------|----|-----|------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | YES                                        | NO | N/A |            |
| 7. <b>For Formal Administration only:</b><br>Verified Statement Regarding Creditors filed.<br>Notice to Creditors to AHCA (>55yo)                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | YES                                        | NO | N/A | CONFIRMED  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                            |    |     |            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                            |    |     |            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                            |    |     |            |
| 8. <b>Is the Petition Properly Executed?</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                            |    |     |            |
| <input type="checkbox"/> Verified<br><input type="checkbox"/> Signed by Petitioner<br><input type="checkbox"/> Signed by attorney 5.020(a)                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Fill in applicable information to the left |    |     |            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                            |    |     |            |
| 9. <b>Miscellaneous</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                            |    |     |            |
| Has formal notice been served on any heir, beneficiary, or creditor not joining or consenting to the Petition?                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                            |    |     |            |
| If testate, and Will directs sale—Loses Homestead exemption<br>See <u>Price</u> 513 So. 2d 767; <u>Knadle</u> 686 So. 2d 681                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                            |    |     |            |
| Checklist for Determining Homestead Status of Real Property (pursuant to Amended Administrative Order L-2022-24-A)                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                            |    |     |            |
| 10. <b>Proposed Orders</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                            |    |     |            |
| <b>Proposed Order Determining Homestead Status of Real Property.</b><br><input type="checkbox"/> Shall describe real property (includes complete legal description);<br><input type="checkbox"/> Shall determine whether real property constituted homestead of decedent;<br><input type="checkbox"/> Identifies by name the person(s) entitled to homestead;<br><input type="checkbox"/> Defines the interest of person(s) receiving the protected homestead;<br><input type="checkbox"/> Finds that the homestead property descended to or was validly devised. |  | Fill in applicable information to the left |    |     |            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                            |    |     |            |

**I certify that I have personally reviewed the foregoing checklist and it is accurate. In making the certification, I have relied upon the information set forth in the pleadings and court filings.**

**Attorney/Litigant for Estate:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number:** (\_\_\_\_) \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Attorney/Movant Signature:** \_\_\_\_\_