IN THE NINTH JUDICIAL CIRCUIT IN AND FOR
ORANGE COUNTY, FLORIDA
PROBATE DIVISION

In Re: Estate of
_____/

Case No.: _____
Division: _____

AFFIDAVIT OF HEIRS

For purposes of this affidavit, you must do the following:

- You must list ALL RELATIVES of the decedent, including yourself, if applicable.
- You must include even the names of relatives who were deceased at the time of the decedent's death, indicating that they are deceased and specifying the date of death.
- If the decedent never had a relative within a particular category (i.e. decedent was the only child, and therefore had no siblings), you must indicate "None" in that category.
- If the decedent's relatives in a particular category are unknown, you must specify "Unknown".
- When applicable, please indicate if the relationship is that of a half-relative (i.e. half-brother or half-sister).

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1. The undersigned person making this Affidavit, _____,

☐ does not have ☐ does have an interest in this estate.

2. ☐ I am ☐ I am not related to the to the decedent as follows:

_____.

I have known the decedent for _____ years.

3a. Spouse of the decedent. [Please provide name, age, and address. If the spouse is deceased, you must provide the name and date of death.]

_____

_____

_____

3b. Decedent's former spouse(s) (due to death or divorce). [You must provide the name, age, and address. If the former spouse is deceased, decedent and former spouse were divorced please indicate name of former spouse and date of divorce.]

_____

_____

_____

4. Children of the decedent or descendants of deceased children. [You must provide the name(s), age(s), and current address(es). If any of the children are deceased, you must provide the name and date of death of each. In addition, you must state if the decedent has any grandchildren from the predeceased children and specify their name, age, and address. If any of the children are not biologically related to both the decedent and decedent's spouse at the time of decedent's death, you must provide the name of that particular child's other biological parent. If the surviving spouse has children who are not the children of the decedent, you must provide their names and current addresses.]

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5. Parents of the decedent. [If the parents are living, you must provide the name, age, and current address of each. If the parents are deceased, you must provide the name and date of death.]

_____

_____

_____

6. Brothers and sisters of the decedent, or descendants of deceased brothers or sisters. [You must specify if the relationship is that of a half-relative, i.e., half-brother or half-sister. You must provide the name, age, and current address of the decedent's brothers or sisters or half-siblings. If any of the brothers or sisters or half-siblings are deceased, you must provide the name and date of death. In addition, you must list the children of any deceased brothers or sisters or half-siblings as well as the children's current addresses.]

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7. Grandparents of the decedent. [If living, you must provide the name, age, and current address. If the grandparents are deceased, you must provide the name and date of death.]

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8. If there are any other relatives who have survived the decedent and are not listed in the answers above, you must provide their name, relationship to the decedent, age, and current address. Please attach additional pages if necessary.

_____

_____

_____

UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT I HAVE READ THE FOREGOING AFFIDAVIT OF HEIRS AND THE FACTS STATED HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

_____
Affiant's Signature

_____
_____
_____
_____

Print name and address of Affiant

State of _____
County of_____

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this _____ day of _____, 20 _____, by _____.

☐ Personally known
☐ Produced identification
Type of Identification:
_____

_____
Notary Public or Deputy Clerk
My Commission Expires:

Print, Type or Stamp Commissioned Name of Notary Public/Deputy Clerk