

**SURROGATE'S COURT OF THE STATE OF NEW YORK  
COUNTY OF NEW YORK**

\_\_\_\_\_X  
**ANCILLARY ADMINISTRATION PROCEEDING**  
**Estate of**

**WAIVER OF CITATION,  
RENUNCIATION AND CONSENT TO  
APPOINTMENT OF ANCILLARY  
ADMINISTRATOR**

\_\_\_\_\_X **Deceased.** **File No.** \_\_\_\_\_

The undersigned, having an interest in the estate of the above-named decedent as a person appointed or acting in the domiciliary jurisdiction to administer decedent's estate in accordance with the law thereof, or a New York domiciliary creditor; and being of full age and sound mind hereby voluntarily appears in the Surrogate's Court of New York County, New York and waives the issuance and service of citation in this matter, renounces all right to Ancillary Letters of Administration of the above captioned estate and consents that

Ancillary Letters of Administration be issued to \_\_\_\_\_, and consents

- that a bond be dispensed with and hereby specifically release any claim I might have under any bond that may be filed; or
- that a bond in the amount of \$ \_\_\_\_\_ be posted.

_____ Signature	_____ Street Address	_____ Date
_____ Print Name	_____ Town/State/Zip	_____ Interest

**STATE OF**  
**COUNTY OF** **ss.:**

On \_\_\_\_\_, 2\_\_\_\_\_, before me personally appeared \_\_\_\_\_ to me known and known to me to be the person described in and who executed the foregoing waiver and consent and each duly acknowledged the execution thereof.

\_\_\_\_\_  
Notary Public  
Commission Expires:  
(Affix Stamp or Seal)

\_\_\_\_\_  
Name of Attorney  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone No. (7/10)