

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

In the Matter of the Estate of

**PETITION TO COMPEL
PRODUCTION OF A WILL**

☐ \$20.00 Filing Fee

Deceased

TO THE SURROGATE'S COURT:

Petitioner Information

Name: _____

Address: _____

Telephone Number: _____ Email Address: _____

Relationship to Decedent: _____

Decedent Information

Name: _____

Domicile Address: _____

Date of Death: _____

Existence of Will

Petitioner believes that the decedent executed a Last Will and Testament. The person or entity believed to have decedent's Will in their possession, or have knowledge of the whereabouts of decedent's Last Will and Testament is:

Name: _____

Address: _____

Telephone Number: _____

The reason I believe the person or entity has the Last Will and Testament of the Decedent is as follows: _____

WHEREFORE:

Petitioner requests that the Court issue an Order directing respondent to appear for examination before this Court on a date to be determined regarding the Will of the decedent; and why they should not file the Last Will and Testament of the decedent with the Court.

Dated: _____

Signature _____

Notary _____

*If petitioner has a copy of a document purporting to be the Last Will and Testament of the decedent, please attach it to this petition as an exhibit.

*An original death certificate for the decedent is required to file this petition.