
Dear Personal Representative:

RE: Estate of : _____

The deadline for claims to be filed against the Estate has expired and no claims have been received in this office.

As Fiduciary of this Estate you may now proceed toward closing the Estate by completing the enclosed SHORT FORM SETTLEMENT report. Either **TYPE or PRINT LEGIBLY IN INK** the information requested. Please read the following instructions **carefully** in order to understand how to complete the forms.

Lines 1-5 are self-explanatory.

#2 - You will only receive a release if your estate value is over \$1,000,000.

- (6) Line 6 - If distribution is being made by a Will, write only these words;
"According to the provisions of the Will of Record"

If the decedent died without a Will, property must be distributed as follows:

Surviving spouse, no children OR Surviving Spouse and children OR Spouse and decedent only	100% to surviving spouse
Surviving spouse with children outside marriage and children with decedent	60% to surviving spouse 40% to descendents of decedent
Surviving spouse and children of decedent not with surviving spouse	50% to surviving spouse 50% to descendents of decedent

- (7) Line 7a - self-explanatory
Line 7b - if you will **not** be distributing according to line 6, explain how distribution is to be made. If a beneficiary is taking personal property because they have paid debts or claims from personal funds, then state such under 7b as "distribution being made in lieu of cash for advancements to the estate by (name of person)."

(8) The **Personal Representative** (also called Fiduciary, Executor, Administrator, etc.) **must sign** the settlement report and have their **signature acknowledged** before a Notary Public. **THE NOTARY MUST USE THEIR SEAL FOR EVERY SIGNATURE.**

(9) WAIVER AND APPLICATION FOR SHORT FORM SETTLEMENT **must be signed by each beneficiary** (including the personal representative if that person is a beneficiary) and **each signature** must be **acknowledged before a Notary**. If there is only one beneficiary, (s)he must sign the waiver. If another person is signing as power of attorney for a beneficiary, a certified copy of the power of attorney **must** be included with the Short Form and Waiver. **Make sure the Notary uses their seal for each and every signature.**

After completing each of the steps outlined above, please do the following:

1. Return the Short Form and Waiver to this office – **one original plus two copies**
2. Enclose a check made payable to the **County Fiduciary Fund** in the amount of **\$21.00** for the first four pages of the original. For any additional pages you **must** contact our office for the correct fee. **Any forms received with the incorrect filing fee are subject to be returned for the correct amount - or if notarized incorrectly.** (Make sure the notary uses their seal/stamp for every signature.

If you are unable to obtain all the beneficiaries' signatures, or there are any outstanding debts or claims, you must use our **LONG FORM SETTLEMENT**, which requires a full accounting of the estate and proof of payment of debts/claims. If a Long Form is needed, please notify our office and we will send the form to you.

Thank You,

Office of the Fiduciary Supervisor

Enclosure

P.S. All assets **EXCEPT REAL ESTATE** must be transferred from the name of the decedent to the beneficiaries' **prior** to the Estate closing.

In the County Commission of _____ County, West Virginia

In the Matter of _____,

Social Security # _____, deceased

SHORT FORM SETTLEMENT

STATE OF WEST VIRGINIA

COUNTY OF _____, to-wit

_____, being first duly sworn,

deposes and says that:

(1) I am the duly appointed and acting personal representative of the estate of _____ deceased.

(2) A "Release" for the West Virginia Inheritance and Transfer taxes **has been** filed with the Clerk of the County Commission of _____ County, WV.

(3) More than ninety (90) days have elapsed since the filing of notice required by WVC 44-3A-4, (newspaper publication for claims in an estate).

(4) The time for filing claims against this estate has expired.

(5) No known and unpaid claims exist against this estate.

(6) The allocation to which each distribute and beneficiary is entitled in the distribution of this estate is as follows:

Cross out Section that **does not** apply and initial

(7a) All property to which each distribute is entitled has been or, upon approval of this settlement, will be delivered to said distribute and beneficiary in conformity with the above allocation.

(7b) although, each distributee and beneficiary is entitled to the above distribution, each distribute and beneficiary has agreed to a different allocation, as follows:

Signature of the Fiduciary

Taken, subscribed and sworn to before the undersigned authority by

in the county aforesaid this _____ day of _____, 20__.

My commission expires, _____.

Notary Public

In the County Commission of _____ County, West Virginia In the Matter of _____, Social Security # _____ deceased

WAIVER AND APPLICATION FOR SHORT FORM SETTLEMENT

Pursuant to the requirements set forth in Section 4, Article 3A, Chapter 44, of the West Virginia Code as amended, we, the distributes and beneficiaries of the above-referenced estate, hereby make application for the acceptance of the attached short form settlement of this estate, thereby waiving any and all rights we may have to inspect, approve, affirm, or object to a complete and comprehensive statement of settlement of this estate as otherwise set forth in Article 3A, Chapter 44 of the West Virginia Code as amended.

Signature of Beneficiary

Signature of Beneficiary

Signature of Beneficiary

Signature of Beneficiary

Signature of Beneficiary

Signature of Beneficiary

State of _____ County of _____, to-wit:
The foregoing Waiver and Application for Short Form Settlement was acknowledged before me this _____ day of _____, 20____, by _____ (Name of Beneficiary).

My Commission expires, _____.
_____ (Notary Public)

State of _____ County of _____, to-wit:
The foregoing Waiver and Application for Short Form Settlement was acknowledged before me this _____ day of _____, 20____, by _____ (Name of Beneficiary).

My Commission expires, _____.
_____ (Notary Public)

State of _____ County of _____, to-wit:
The foregoing Waiver and Application for Short Form Settlement was acknowledged before
me this _____ day of _____, 20____, by
_____ (Name of Beneficiary).

My Commission expires, _____.
_____ (Notary Public)

State of _____ County of _____, to-wit:
The foregoing Waiver and Application for Short Form Settlement was acknowledged before
me this _____ day of _____, 20____, by
_____ (Name of Beneficiary).

My Commission expires, _____.
_____ (Notary Public)

State of _____ County of _____, to-wit:
The foregoing Waiver and Application for Short Form Settlement was acknowledged before
me this _____ day of _____, 20____, by
_____ (Name of Beneficiary).

My Commission expires, _____.
_____ (Notary Public)

State of _____ County of _____, to-wit:
The foregoing Waiver and Application for Short Form Settlement was acknowledged before
me this _____ day of _____, 20____, by
_____ (Name of Beneficiary).

My Commission expires, _____.
_____ (Notary Public)