

**IN THE ISLETA TRIBAL COURT  
ISLETA, NEW MEXICO**

**IN THE MATTER OF THE ESTATE OF:**

**CASE NO.** \_\_\_\_\_

**PETITION FOR PROBATE OF ESTATE (WITHOUT A WILL)  
AND APPOINTMENT AS ADMINISTRATOR**

**COMES NOW** the Petitioner \_\_\_\_\_, and states the following:

1. I had the following relationship with the decedent (person who died), which qualifies me to act as the Administrator of the Estate. (*Check one of the boxes below*)
  - Surviving spouse  
*If you are not the spouse, is there a surviving spouse?*  Yes  No
  - Child: [daughter] [son] (*circle one*)
  - Other relative (*specify*): \_\_\_\_\_
  - Interested person (*specify interest in matter*): \_\_\_\_\_

***Priority of persons seeking appointment as Administrator (in order of priority):***

- 1) Surviving spouse of the decedent;
- 2) If there is no spouse, or the spouse declines to serve as the Administrator, the decedent's children have equal priority for appointment;
- 3) If decedent has a deceased child, the deceased child's surviving children, also have an equal priority for appointment;
- 4) If there are no spouse or children, decedent's surviving parents have equal priority for appointment;
- 5) If there are no spouse, children, or parents, then decedent's brothers and sisters have equal priority for appointment (if one or more of decedent's brothers or sisters has died, the children of the deceased sibling(s) also have an equal priority for appointment);
- 6) An interested person may also serve as an Administrator and has priority after all of the persons listed above.

*Note: A person who has highest or equal priority to serve as Administrator may decline to serve and confer his/her relative priority upon another, nominating him/her to serve as Administrator, but this must be done in writing. The Administrator must be at least 18 years old, and not otherwise disqualified to serve.*

2. The decedent died on \_\_\_\_\_ (*date*), at the age of \_\_\_\_\_. At the time of death, the decedent was domiciled or owned property located within the Pueblo of Isleta Reservation and resided at (physical address): \_\_\_\_\_
3. That the decedent's estate consists of personal and real property which is within the jurisdiction of the Isleta Tribal Court.

4. Petitioner has made a careful search for a will of the decedent and has been unable to find any such will and, therefore, represents to the Court that the decedent died without a will.
5. The following is a list of decedent's heirs (or next of kin), including myself, any spouse, children, and other heirs.

Petitioner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relation to decedent: \_\_\_\_\_ Age (if a minor): \_\_\_\_\_

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relation to decedent: \_\_\_\_\_ Age (if a minor): \_\_\_\_\_

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relation to decedent: \_\_\_\_\_ Age (if a minor): \_\_\_\_\_

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relation to decedent: \_\_\_\_\_ Age (if a minor): \_\_\_\_\_

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relation to decedent: \_\_\_\_\_ Age (if a minor): \_\_\_\_\_

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relation to decedent: \_\_\_\_\_ Age (if a minor): \_\_\_\_\_

6. I do not know of any other probate action in this matter, nor has an administrator or personal representative been appointed either in New Mexico or any other jurisdiction.
7. That it is necessary to administer the estate of the decedent and appoint an Administrator for this purpose and that Petitioner is competent and qualified to administer this estate.

**WHEREFORE**, Petitioner requests that the Court:

1. Appoint Petitioner as the Administrator of the decedent's estate;
2. That decedent's estate be probated pursuant to the law;
3. Issue Letters of Administration to Petitioner;

4. Schedule this matter for a hearing *and* send notice to all persons I have listed who are heirs of the decedent; and
5. Order other such relief as this court believes to be appropriate.

*I hereby certify that the information I have provided above is true, and correct to the best of my knowledge and belief.*

_____ Print Name of Petitioner	_____ Signature of Petitioner	_____ Date
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Subscribed and Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires on: \_\_\_\_\_

**CONSENT TO PETITIONER'S APPOINTMENT AS ADMINISTRATOR**

*If any surviving heir has equal or higher priority than you for appointment as Administrator, you must have each heir sign below to show their consent to your serving as Administrator.*

*I \_\_\_\_\_, hereby consent to the appointment of the personal representative listed above.*

Signature: \_\_\_\_\_ Relationship to decedent: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

*I \_\_\_\_\_, hereby consent to the appointment of the personal representative listed above.*

Signature: \_\_\_\_\_ Relationship to decedent: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

*I \_\_\_\_\_, hereby consent to the appointment of the personal representative listed above.*

Signature: \_\_\_\_\_ Relationship to decedent: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

*I \_\_\_\_\_, hereby consent to the appointment of the personal representative listed above.*

Signature: \_\_\_\_\_ Relationship to decedent: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

*I \_\_\_\_\_, hereby consent to the appointment of the personal representative listed above.*

Signature: \_\_\_\_\_ Relationship to decedent: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

*I \_\_\_\_\_, hereby consent to the appointment of the personal representative listed above.*

Signature: \_\_\_\_\_ Relationship to decedent: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_