

**CONFEDERATED SALISH & KOOTENAI TRIBAL COURT**

**PROBATE APPLICATION FORM**

1. Applicant:

Name: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Relationship to Deceased: \_\_\_\_\_

Are you seeking appointment as Personal Representative?  Yes  No

2. Deceased:

Name: \_\_\_\_\_

Residence: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Tribal UO #: \_\_\_\_\_

3. Was the Deceased married at the time of death?  Yes  No

Name of Spouse: \_\_\_\_\_

Names of children of this marriage: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did the Deceased have other children?  Yes  No

Names of those children: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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4. Did the Deceased have a will?       Yes  No

If so, where is the will? \_\_\_\_\_

Have you looked for a will? \_\_\_\_\_

Will filed with the Court? \_\_\_\_\_

5. Did Deceased have an attorney?       Yes  No

Attorney's name: \_\_\_\_\_

6. Copy of Death Certificate filed? \_\_\_\_\_

7. Did Deceased have an IIM account? \_\_\_\_\_

8. Did Deceased hold title to any property requiring transfer of title to a successor?

Yes  No

List of such property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Did the Deceased have trust property and/or have a homesite lease?  No     Yes

If yes, where is the trust property and/or homesite located? \_\_\_\_\_

**NOTE:** Applicants must serve **CSKT Lands Department** **NOTICE OF THIS PROBATE PROCEEDING** in all cases regardless of whether the Deceased had property located on the Flathead Reservation or other tribal jurisdiction.

10. Did Deceased have a bank account?  Yes  No

Bank: \_\_\_\_\_

Balance: \_\_\_\_\_

11. Is there an unused balance remaining from the Deceased's Tribal burial allowance?

Yes  No

Amount: \_\_\_\_\_ Will it be used for burial or memorial expenses?: \_\_\_\_\_

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12. Is there any other property or assets in the Deceased's estate?  Yes  No

List of other property or assets: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. List of potential heirs, beneficiaries, and distributees:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

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Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Relationship  
to deceased: \_\_\_\_\_

Relationship  
to Deceased: \_\_\_\_\_