**PLEASE READ Instructions BELOW FOR Small Estates Act Affidavit**

Attached is The Small Estates Affidavit.

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| **A “Small Estate” is one where the value of the Decedent’s personal property**  **does not exceed $50,000.00**  **⮚You cannot transfer title to real estate by a Small Estate⮘** |

* A Small Estate cannot be opened until after **45 days** from date of death.
* Complete the Small Estates Act Affidavit and bring it with you to court. DO NOT SIGN THE AFFIDAVIT. If you need help, we will help you when you get to the court.
* If the Decedent left a **Last Will**, you are required to bring the **original** that will be deposited without probate with the Clerk to support the **Affidavit**.
* Court costs for the Small Estates Act Affidavit is **$103.50**, payable to: “**Clerk and Master**”
* You will need a **Surety Bond** written by an insurance company.

(Below is a list of insurance companies who write Surety Bonds for Small Estates.)

* You must call the insurance company to obtain the bond prior to coming to court.
* The cost of the Surety Bond depends upon the value of the Small Estate. These Surety Bonds should cost **APPROXIMATELY** **$100.00 – $320.**

**Options Insurance Jim Steed (423) 681-1380 (office)**

**7239 East Brainerd Road Email:** [**jim@jsteedagency.com**](mailto:jim@jsteedagency.com) **(423) 313-8971 (cell)**

**Chattanooga, TN 37421**

**RSS Insurance Todd Baker (423) 255-4887**

**6236 B Airpark Drive Email:** [**tbaker@rssins.com**](mailto:tbaker@rssins.com)

**Chattanooga, TN 37421**

**TRM Insurance  Darren S. Thompson (423) 756-4336 (office)**

**412 Georgia Avenue, Suite 202**

**Chattanooga TN  37403**

**Brock Insurance Agency Pat Kleehanner (706) 866-3394**

**823 Chickamauga Avenue** [**patk@brockINS.com**](mailto:patk@brockINS.com)

**Rossville, GA 30741**

**Flegal Insurance Company Lane McKown (706) 866-9750**

**214 Andrew Street**

**Rossville, GA 30736**

**Atlas Insurance Agency Caleb Ray (423) 822-5263 (office)**

**3501 Dayton Blvd., Suite G (423) 227-8220 (cell)**

**Chattanooga, TN 37415**

**DUE TO THE HIGH VOLUME OF PROBATES, PLEASE CALL TO MAKE AN APPOINTMENT. IF YOU DO NOT HAVE AN APPOINTMENT, WE MAY NOT BE AVAILABLE TO ASSIST YOU. ANY QUESTION PLEASE CALL (423) 209-6615**

**Probate Hours** **for the Small Estate are:** Tuesday – Friday

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| Probate  court: | | | | | | Hamilton County Courthouse  625 Georgia Avenue, Suite 300  Chattanooga, TN 37402 | | |
| **IN THE CHANCERY COURT FOR HAMILTON COUNTY, TENNESSEE** | | | | | **Small Estates Act**  **Affidavit**  TCA §§ 30-4-101—30-4-105. | | | | | | Part 2 Probate Division | | | |
| File N0. | | | |
| In The Matter of The Estate of  Decedent | | | | | | | | | | Affiant | | | | |
| **1.** Decedent, \_\_\_\_\_, died on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.  **1.1** Age **1.2** Date **1.3** County **1.4** State | | | | | | | | | | | | | | |
| **2.** Decedent’s legal *Tennessee* residence  on the date of death: | |  | | | | | | | | | | | | |
| **3.** Decedent’s Last Will: (Check one box only)  **3.1** ❑ Decedent left no Last Will.  **3.2** ❑ Decedent left a Last Will, an unprobated copy of which is attached to this affidavit as EXHIBIT A. | | | | | | | | | | | | | | |
| **4.** Decedent left at death the following unpaid debts: | | | | | | | | | | | | | | |
| **4.1** Creditor | | | | | | | **4.2** Address | | | | | | | **4.3** Amount |
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| **4.4** Sub Total | | | | | | | | | | | | | |  |
| If other items, attach separate sheet(s). | | | | | | | | **4.5** Sub Total from attached sheet(s) | | | | | |  |
| **4.6** Total | | | | | | | | | | | | | |  |
| **5.** Decedent died owning **personal property** as follows: | You mustinclude all personal property or any interest in therein, owned by Decedent on the date of death, including insurance on Decedent’s life payable to the estate. | | | | | | | | | | | | | |
| **Do not list:** | | | (a) Insurance on Decedent’s life payable to beneficiaries other than the estate; (b) personal property held jointly with Decedent with right of survivorship. | | | | | | | | | | |
| **This affidavit is not muniment of title for real estate.** Tenn. Code Annot. § 30-4-102(4). | | | | | | | | | | | | | |
| **5.1** Item | | | | | | **5.2** Location and Possession | | | | | | | **5.3** Value | |
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| **5.4** Sub Total | | | | | | | | | | | | |  | |
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| **6.** Decedent owned the following insurance policies payable to Decedent's estate: | | | | | | |
| **6.1** Insurance Company | | | | **6.2** Policy Number | | **6.3** Face Value |
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| **6.4** Sub Total | | | | | |  |
| If other items, attach separate sheet(s). | | | **6.5** Sub Total from attached sheet(s) | | |  |
| **6.6** Total | | | | | |  |
| **7.** Provide for each devisee, legatee, or heir who may be entitled to any of Decedent's property: | | | | | | |
| **7.1** Name | **7.2** Age | **7.3** Relation | | | **7.4** Address/Zip Code | |
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| I am willing to collect and preserve all assets of this estate, pay all creditors and distribute the remainder according to the terms of the Will or according to the laws of descent and distribution of the State of Tennessee. T.C.A. §§ 30-2-305, 30-4-104(c). I shall file returns and pay the tax on property in this estate as required by title 67, chapter 8, parts 3-5, as now or hereafter amended, revised or recodified. T.C.A. § 30-4-104(d). | | | | | | |
| ***Subject to penalty for perjury, I evidence by my signature the facts stated in this affidavit are not false or misleading and are true, correct, and complete to the best of my knowledge and belief and that I am mindful of my duties as imposed upon me by Title 30 Chapter 4 of the Tennessee Code Annotated.*** | | | | | | |

This \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Affiant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Phone

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| **Chancery Court of**  **Hamilton County Tennessee** | **}** |

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

ROBIN L. MILLER, Clerk & Master

By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Probate Deputy