

SAINT REGIS MOHAWK TRIBAL COURT

SMALL ESTATE PROCESS

For estates valued at less than \$20,000 USD with no real property (land). If there is real property, the estate must be probated.

1. Fill out affidavit from Tribal Court.
2. Attach original will, if any.
3. Attach proof of death.
4. Attach family tree certified by Tribal Clerk's Office.
5. Identify beneficiaries by name and address.
6. Attach notarized consent forms from heirs consenting to the small estate process.
7. Submit all above documents and filing fee to the Court.

**SAINT REGIS MOHAWK TRIBAL COURT
IN AND FOR THE SAINT REGIS MOHAWK TRIBE**

In the Matter of the ESTATE OF

Case No. _____

_____,
deceased.

**SMALL ESTATE AFFIDAVIT
FOR COLLECTION OF PROPERTY**

I, the Affiant, allege the following:

1. Affiant(s) name, mailing address, phone number, and relationship to decedent are as follows:

(A) Name: _____

(B) Mailing Address: _____

(C) Phone Number: _____

(D) Relationship to Decedent: _____

(A) Name: _____

(B) Mailing Address: _____

(C) Phone Number: _____

(D) Relationship to Decedent: _____

2. The name, residence, date and place of death, and SRMT Tribal Enrollment information above-named decedent are as follows:

(A) Name: _____

(B) Date of Death: _____

(C) Place of Death: _____

(D) Residence: _____

(E) SRMT Enrollment Number: _____

A copy of the decedent's death certificate must be submitted along with this affidavit.

3. The value of the assets of the decedent's estate exceeds the estate's known liabilities.
4. The value of the decedent's estate does not exceed the monetary limit of twenty-thousand dollars (\$20,000), and the Estate contains no interest in real property.
5. I am either an heir of the decedent, and the decedent left no will, or I am a named devisee of the decedent in the decedent's will. *Please attach a copy of the decedent's written will if there is one.*
6. More than _____ days have passed since the decedent's death.
7. There is no pending administration of the decedent's estate.

10. If any persons listed above are minors or persons under disability, please include the following information (use additional pages if necessary):

<u>Name</u>	<u>Mailing Address</u>	<u>Name and Address for Guardian</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. All heirs or devisees will be given notice of this affidavit within 30 days of filing and must provide written consent to have the estate settled informally.

12. All assets of the decedent's estate and the value of such assets are listed below (use additional pages if necessary):

<u>Asset</u>	<u>Value</u>	<u>Additional Information</u>
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

13. All liabilities and debts of the decedent's estate, and what the estate owes each creditor, are listed below (use additional pages if necessary):

<u>Liability/Debt</u>	<u>Amount Owed</u>	<u>Creditor Information</u>
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

14. The following heirs or devisees are entitled to the following property (use additional pages if necessary):

<u>Heir or Devisee</u>	<u>Property</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

DECLARATION

By signing below, I am requesting that the estate named above be settled informally without having to admit the estate to probate. I certify to the best of my knowledge, information, and belief that this affidavit is not being presented for an improper purpose such as to harass or cause unnecessary delay. I agree to provide the Saint Regis Mohawk Tribal Court with any changes to my address where case-related papers may be served. I understand that my failure to keep my address updated may result in the inability of the Court to send my documents to me.

Signature of Affiant

Print Name

Date

**State of New York
Territory of Akwesasne**

Notary

Date: _____

Location: _____

I verify that the above named person signed this affidavit before me on this ____ day of _____, 20____.

Commission Number: _____

Commission Expires: _____

Notary Public Signature: _____

**Checklist of all Documents Required for Small Estate Affidavit
(A copy must be included with this Affidavit)**

- Certificate of Death
- Written Will, if any
- Certified Family Tree by SRMT Tribal Clerk’s Office
- Waiver from each heir and beneficiary consenting to the small estate administration

Failure to submit the aforementioned documentation will result in a delay in scheduling this matter before the presiding Judge.

CERTIFIED FAMILY TREE

***birth certificates may be requested**

REQUEST FORM

Requestor:

First Name	Middle Name	Last Name	DOB
------------	-------------	-----------	-----

Mailing Address (Physical Address and P.O. Box)

Phone Number	E-mail Address
--------------	----------------

Name of Estate:

First Name	Middle Name	Last Name	DOB
------------	-------------	-----------	-----

(Circle One)

spouse/

divorced spouse/

life partner

First Name	Middle Name	Last Name	DOB
------------	-------------	-----------	-----

Children:

*Please indicate
if child is;
biological (B) or
adopted in (I) or
adopted out (O)

First Name	Middle Name	Last Name	DOB	(B)	(I)	(O)
------------	-------------	-----------	-----	-----	-----	-----

First Name	Middle Name	Last Name	DOB	(B)	(I)	(O)
------------	-------------	-----------	-----	-----	-----	-----

First Name	Middle Name	Last Name	DOB	(B)	(I)	(O)
------------	-------------	-----------	-----	-----	-----	-----

First Name	Middle Name	Last Name	DOB	(B)	(I)	(O)
------------	-------------	-----------	-----	-----	-----	-----

First Name	Middle Name	Last Name	DOB	(B)	(I)	(O)
------------	-------------	-----------	-----	-----	-----	-----

Grandchildren:

First Name	Middle Name	Last Name	DOB
------------	-------------	-----------	-----

First Name	Middle Name	Last Name	DOB
------------	-------------	-----------	-----

First Name	Middle Name	Last Name	DOB
------------	-------------	-----------	-----

If no spouse or children, please list the following:

Siblings:

***Please indicate if sibling is: biological (B) or adopted in (I) or adopted out (O)**

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

Nieces/Nephews:

***Please indicate if Niece/Nephew is: biological (B) or adopted in (I) or adopted out (O)**

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

First Name	Middle Name	Last Name	DOB	(B) (I) (O)
-------------------	--------------------	------------------	------------	--------------------

***PLEASE ATTACH ADDITIONAL PAGES AS NEEDED.**

**Checklist of all Documents Required for Small Estate Affidavit
(A copy must be included with this Affidavit)**

- Certificate of Death
- Certified Family Tree by SRMT Tribal Clerk's Office
- Copy of decedent's Will and/or Codicil(s), if any
- Notarized consent forms from all named heirs on the affidavit.

Failure to submit the aforementioned documentation will result in a delay in review of the small estate affidavit.