

Register of Wills of Chester County, Pennsylvania

**SMALL ESTATE AFFIDAVIT**

**UNDER 20 Pa.C.S.A. §3101(d)**

**For Insurance Proceeds ONLY**

**NOT to be used for Settlement of Small Estates under 20 Pa.C.S.A. §3102**

**(Original Death Certificate Must Accompany this Form)**

Decedent \_\_\_\_\_ File No. 15-\_\_\_\_\_

also known as \_\_\_\_\_ Social Security No. \_\_\_\_\_

Before the Register of Wills of said County, \_\_\_\_\_  
(name of petitioner)

who resides at \_\_\_\_\_ being duly sworn,  
(address of petitioner)

deposes and says that \_\_\_\_\_, age \_\_\_\_\_, a resident of  
(Decedent)

\_\_\_\_\_, in Chester County, departed this life, at \_\_\_\_\_  
(Township, Borough, City) (location)

on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

The total amount of insurance proceeds payable by \_\_\_\_\_ does not exceed  
(name of company)

**\$11,000 and 60 days have elapsed since the death of the insured. The undersigned agrees payment cannot be made under this Affidavit if a written claim for same has been made by a Personal Representative of the estate and no other heir(s) having preference exist or have released their benefits to the undersigned.**

**That said decedent left a spouse – whose name and residence is:**

Spouse Name: \_\_\_\_\_ Residence: \_\_\_\_\_

Phone Number: \_\_\_\_\_

and the following as next of kin:

NAME	RELATIONSHIP	RESIDENCE & PHONE NUMBER

That the above named are the spouse and all the known next of kin of said decedent, to the best of my knowledge and belief. **Your Petitioner avers there are NO KNOWN PROBATABLE ASSETS that would require an estate proceeding. Therefore, NO ESTATE WILL BE RAISED, AND LETTERS ARE NOT NECESSARY.**

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

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

\_\_\_\_\_  
My Commission Expires

Signed by: \_\_\_\_\_  
Name of Petitioner

Register of Wills:  
Kindly enter appearance in the above case this \_\_\_\_\_

day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Attorney ID No.

**BE IT REMEMBERED, that as of this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_**

**There has been NO ESTATE RAISED FOR THIS DECEDENT AND NO LETTERS HAVE BEEN ISSUED BY THIS COURT.**

\_\_\_\_\_  
MICHELE VAUGHN  
Register of Wills & Clerk of Orphans' Court

# **SMALL ESTATE AFFIDAVIT**

## ***Instructions for Filing***

1. ORIGINAL DEATH CERTIFICATE must accompany this Form.
2. \$25 FILING FEE made payable to Register of Wills. We will accept cash or a money order. NO PERSONAL CHECKS ACCEPTED.
3. The form must be Notarized. This office does not have a Notary on staff.
4. Mailed filings must provide a self-addressed stamped envelope for return mailing of certification & receipt.
5. These Affidavits are not to be used for Settlement of Small Estates under *20 Pa.C.S.A §3102*.