SURROGATE'S COURT OF THE STATE OF NEW YORK

COUNTY of BRONX

In the Matter of the Estate of

_____

Deceased.

PETITION TO DISCHARGE

BOND-SCPA 2203

File # _____

Petitioner respectfully alleges as follows:

Petitioner:
Name: _____
Address: _____
Telephone and Email: _____

1. Petitioner is the duly appointed fiduciary of the above-captioned estate and resides at the address set forth above.

2. Letters _____ (Testamentary /of Administration) were issued to Petitioner by this Court on _____.

3. At the time Letters issued, Petitioner was required to file a bond in the exact amount of **$**_____, which bond is the subject of this application.

4. The surety on said bond is _____, having an address of _____.

5. The Decedent (or infant), _____, died (born) on_____.
Having had a residence at _____.

6. The status relating to taxes is as follows: *(check one)*

- ☐ All taxes have been paid.
- ☐ No taxes were due.

7. The Petitioner has fully accounted and made full disclosure in writing of the administration of the estate to all interested parties hereinafter set forth.

8. A period of _____ (time elapsed) has passed since the issuance of Letters. The application of the petitioner is proper at this time because: *(check one)*

a. In the case of an Executor or Administrator

- ☐ Letters issued have been revoked.
- ☐ The time for creditors to present claims has expired and all administration expenses and known debts of the decedent have been paid.

b. In the case of a Testamentary Trustee

- ☐ The trust has been fully executed.
- ☐ The trust has NOT been fully executed.

c. In the case of a Guardian

- ☐ The infant has reached the age of 18.
- ☐ The infant has died.

9. The following are all Distributees /Interested Parties of the Decedent, with their respective names, addresses, and relationships:

a. Name: _____
Address: _____
Nature of Interest: _____

b. Name: _____
Address: _____
Nature of Interest: _____

(Attach additional pages if necessary.)

10. The exact total dollar value of all estate assets prior to distribution was **$**_____.

11. Estate assets were distributed in full as follows, with precise itemization:

- Recipient: _____ — Amount: $_____
- Recipient: _____ — Amount: $_____
- Recipient: _____ — Amount: $_____

(Attach schedule if necessary.)

12. After the above distributions, the balance of the estate and/or estate account is **$0.00**.

13. Petitioner has received **no fiduciary commissions**, and all commissions were expressly waived.

14. No prior application has been made to this or any other Court for the relief herein requested.

WHEREFORE, Petitioner respectfully requests an Order of this Court discharging the bond filed herein in the exact amount of **$**_____, issued by _____ **(Surety Company)**, and granting such other and further relief as the Court deems just and proper.

_____ **Dated:** _____

Petitioner's signature

Printed Name: _____

VERIFICATION

STATE OF NEW YORK): ss.:
COUNTY OF _____)

I, _____, being duly sworn, depose and say that I am the Petitioner named herein; that I have read the foregoing Petition to Discharge Bond and know the contents thereof; and that the same is true to my own knowledge, except as to matters stated upon information and belief, and as to those matters I believe them to be true.

_____
Petitioner's signature

Sworn to before me this _____ day of _____, **20**____

_____ _____

Notary Public Commission expires

STATE OF NEW YORK

SURROGATE'S COURT: COUNTY OF BRONX

Bond Discharge Proceeding

Estate/Guardianship of

_____

WAIVER under SCPA 2203

(SURETY)

File No. _____

The undersigned, being the surety on the bond of the fiduciary representative/guardian named below, hereby personally appears in the Surrogate's Court of Bronx County and:

(1) ACKNOWLEDGES the receipt of a copy of the summary statement of the account; and

(2) UNDERSTANDS that I may request a copy of the Informal Account from the fiduciary representative/attorney for the Estate or the guardian; and

(3) CONSENTS that _____

(Name of Representative/Guardian)

as _____ be released and discharged; and
(Capacity: Executor/Administrator/Guardian)

(4) REQUESTS AND EMPOWERS the Surrogate of Bronx County, upon filing this Instrument in writing, to make and enter the proper decree and finally releasing and discharging the above named representative(s)/guardian(s) and the Surety.

Signature: _____ Dated: _____

CORPORATE ACKNOWLEDGMENT

STATE OF NEW YORK

COUNTY OF BRONX ss:

On _____ the deponent below named came personally before me, and such deponent, being personally known to me and being duly sworn by me, deposed and said:

(1) Deponent's name is _____

(2) Deponent resides at _____

(3) Deponent is _____ of _____

(Title) (Name of Corporation)

(4) Such corporation is the corporation described in and which executed the above instrument; that the seal affixed to said instrument is the seal of such corporation; that said seal was so affixed by order of the Board of Directors of such corporation; and that deponent's name was signed thereto by like order.

_____

(Notary Public)

Commission Expires _____

SURROGATE'S COURT OF THE STATE OF NEW YORK
COUNTY OF _____

----------X

ACCOUNTING BY _____

RECEIPT AND RELEASE

File No._____

as the _____

of the ESTATE OF _____

a/k/a _____

Deceased.

----------X

The undersigned, being of full age, sound mind and under no disability, and entitled to share in the estate of the above named decedent as a [check one] ☐ legatee under a will, ☐ distributee of an intestate share, ☐ trust beneficiary, ☐ creditor of the estate, ☐ other [specify]

(a) Acknowledges that each fiduciary named above has fully and satisfactorily accounted for all assets of the estate;

(b) Approves the written account verified on _____, 20 ____ as submitted to the undersigned;
[Delete paragraphs (a) and (b) if the undersigned is not interested in or affected by the amount of the residuary estate or trust, or if being made pursuant to a decree of the court.]

(c) Acknowledges receipt of money paid or property transferred or delivered as follows:

money (cash or check): $ _____

the following property: valued at $ _____

The following payment and/or transfer is in full payment or distribution of :

☐ a legacy under Paragraph/Article _____ of the will or trust;
☐ a claim against the estate;
☐ the amount directed to be paid by a decree of this court dated:
☐ other [specify]:

(d) Releases and discharges each fiduciary named above from all liability to the undersigned for any and all matters relating to or derived from the administration of the estate; waives the issuance and service of a citation to attend any and all proceedings for the judicial settlement of the account; and authorizes the Surrogate to make and enter a decree settling the account and fully releasing and discharging each fiduciary named above as to all matters embraced therein.

Dated: _____

_____ _____

(Signature) (Corporate Name)

_____ _____

(Print Name) (Signature of Officer)

JA-2 (12/96)

STATE OF NEW YORK)

COUNTY OF_____) ss.:

On _____, 20____, before me personally appeared

[INDIVIDUAL]

☐ _____ to me known and known to me to be the person

described in and who executed the foregoing receipt and release and duly acknowledged the execution thereof.

[CORPORATION]

☐ _____ to me known, who duly swore to the foregoing instrument and who did say that he/she resides at _____

and that he/she is a _____ of _____ the corporation/national banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation.

_____
Notary Public
Commission Expires:
(Affix Notary Stamp or Seal)

Name of Attorney: _____ Tel. No.: _____

Address of Attorney: _____