

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

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Estate of

PETITION TO REMOVE
RESTRICTIONS PURSUANT
TO SCPA 805(3)

a/k/a

File No. _____

Deceased

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TO THE SURROGATE'S COURT, COUNTY OF BRONX

The Petition of _____, domiciled and
residing at _____,
respectfully shows:

1. By petition verified _____, _____, he/she made application for the granting of Letters of
Administration to him/her for the Estate of _____ deceased who at the time of his/her death
was domiciled and resided at _____
_____.

2. On the _____ day of _____, _____, a decree was duly entered by this court directing that Letters of
Administration be issued to your petitioner upon your petitioner qualifying as required by law.

3. The Estate has entered into a contract to sell the decedent's real property for the sum of \$_____, and your petitioner
must be authorized to collect the proceeds of sale, in accordance with SCPA 805 (3).

4. The names and post office addresses of all the persons interested in this estate, other than your petitioner are the
following:

Name

Domicile and Post Office Address

Nature of Interest

All of the above-mentioned persons are of full age and sound mind.

Address of Attorney:

PRESENT: Hon. NELIDA MALAVE-GONZALEZ,
Surrogate.

ORDER
File No.

(1/08)