

**SMALL ESTATE AFFIDAVIT  
INTESTATE (WITHOUT A WILL)**

IN THE COUNTY COMMISSION OF JEFFERSON COUNTY, WEST VIRGINIA

RE: THE ESTATE OF \_\_\_\_\_

DATE OF DEATH: \_\_\_\_\_

STATE OF WEST VIRGINIA,

COUNTY OF JEFFERSON, to-wit:

I, \_\_\_\_\_, being a Successor of the Decedent identified below, being first duly sworn, upon oath and under penalty of perjury, do depose and say to the best of my knowledge and belief as follows:

1. My name is \_\_\_\_\_, and my current address is

\_\_\_\_\_  
\_\_\_\_\_.

2. The Decedent, \_\_\_\_\_, died on \_\_\_\_\_ (date of death), a resident of \_\_\_\_\_ County, State of West Virginia, with his/her usual residence being

\_\_\_\_\_  
\_\_\_\_\_.

3. A certified death certificate has been furnished herewith for filing in this County. I am a Successor of the decedent as \_\_\_\_\_ (state relationship).

**INTESTACY (NO WILL)**

4. At the date of death, the Decedent died intestate with no known will. The Decedent left as his/her heirs-at-law and Distributees in accordance with the laws of intestate descent and distribution of the State of West Virginia the following persons. **\*\*Last known mailing address is required (list any pre-deceased heirs as DECEASED):**

a. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or percentage: \_\_\_\_\_

b. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or percentage: \_\_\_\_\_

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c. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or percentage: \_\_\_\_\_

d. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or percentage: \_\_\_\_\_

**\*\* (If more space is needed, attach additional page(s) to affidavit)**

5. The Decedent's entire personal probate estate, as of the date of the Decedent's death, wherever located, consists only of small assets and the aggregate fair market value of the small assets does not exceed \$50,000. The small assets of the Decedent are described and itemized as follows:

	Description	Fair Market value
	Total	

**(If more space is needed, attach additional page(s) to affidavit)**

6.  [Check if applies] At least **60** days have elapsed since the Decedent's date of death and no application for the appointment of a personal representative for the Decedent is pending or has been granted in any jurisdiction, and no affidavit of Small Estate has been filed by a Successor nominated as a personal representative or executor under the provisions of the Will of the Decedent.

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7. The undersigned Affiant will faithfully administer the small assets of the Decedent in accordance with the law and pay or deliver the same to the Successor or Successors so entitled. Witness my hand and seal this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Affiant/Successor

Taken, subscribed, and sworn to before me the undersigned authority by

\_\_\_\_\_, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

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

{SEAL}