

Name of Person Filing: _____
 Street Address: _____
 City, State, Zip Code: _____
 Telephone Number: _____
 Email Address: _____
 ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
 If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
 PINAL COUNTY**

In the Matter of the Estate of

CASE NUMBER: _____

**WAIVER OF RIGHT TO APPOINTMENT AS
 PERSONAL REPRESENTATIVE AND CONSENT
 TO APPOINTMENT OF PERSONAL
 REPRESENTATIVE**

_____ an Adult a Minor, deceased

HONORABLE: _____

THE UNDERSIGNED PERSON STATES AS FOLLOWS:

1. I am the (CHECK ONE BOX)
 - (Check only if there is no Will) heir of the decedent's estate without a Will or
 - (Check only if there is a Will) a person named in the decedent's Will.

2. I have priority for appointment as Personal Representative of this estate under A.R.S. § 14-3203 because: (CHECK WHICH BOX APPLIES)
 - (Check only if there is a Will) I am named as Personal Representative in the Will of the person who died;
 - (Check only if there is a Will) I am the surviving spouse of the person who died and I am named in the Will;
 - (Check only if there is a Will) I am another person named in the Will of the person who died;
 - I am the surviving spouse of the person who died;
 - I am another person entitled to inherit the property of the person who died because (EXPLAIN)

3. I waive and want to give up any right I have to appointment as the Personal Representative of this estate.

4. I consent to the appointment of (name) _____
 as Personal Representative of the estate.

STATE OF ARIZONA)
PINAL COUNTY) ss.

(Signature)

SUBSCRIBED AND SWORN TO before me this _____ day of _____ 20 _____

My Commission Expires:

By _____
(Deputy Clerk/Notary Public)