Print Clear

State of New Jersey
Ocean County Surrogate's Court

In the Matter of	:	Docket: _____
Deceased	:	CONSENT TO VOLUNTARY DISCHARGE OF EXECUTOR or ADMINSTRATOR C.T.A, and RENUNCIATION.

TO THE SURROGATE OF THE COUNTY OF OCEAN, STATE OF NEW JERSEY:

BE IT KNOWN, that I _____, successor executor and/or residuary devisee of the Estate of _____ late of the _____, hereby consent to the voluntary discharge of _____as Personal Representative of the estate, renounce my right to serve as Personal Representative, and request that _____ be named as Successor Executor and/or Substitute Administrator C.T.A.

BE IF FURTHER KNOWN that I:

- ◯ **waive** my right to a final verified account showing the true condition of the Estate, OR
- ◯ **do not waive** my right to a final verified account showing the true condition of the Estate.

Date: _____ _____

State of _____
SS:
County of _____

Be it Remembered that on _____ before me, the subscriber, personally appeared _____ who I am satisfied is the person in the foregoing instrument named, and I having first made known to him/her the contents thereof, he/she did thereupon acknowledge that he/she signed, sealed and delivered the aforesaid instrument as his/her voluntary act and deed for the uses and purposes therein expressed.

_____

AFFIX SEAL / STAMP

Probate Clerk/Notary