

State of New Jersey
Ocean County Surrogate's Court

In the Matter of

Docket: _____

Deceased

**CONSENT TO VOLUNTARY
DISCHARGE OF ADMINISTRATOR
and RENUNCIATION**

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

BE IT KNOWN, that I _____, heir-at-law of
_____ late of _____ in said County of Ocean, hereby
consent to the voluntary discharge of _____ as Administrator of the
estate, renounce all right and claim to serve as Substitute Administrator, and request that
_____ be named as Substitute Administrator of said decedent's
estate.

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 _____
County of _____

ss:

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