

1 **PET**

2 _____
(Name)

3 _____
(Address)

4 _____
(City, State, Zip Code)

5 _____
(Telephone number/E-mail Address)

Petitioner, In Proper Person

6 **EIGHTH JUDICIAL DISTRICT COURT**

7 **CLARK COUNTY, NEVADA**

8
9 In the Matter of the Estate of:

Case No.: P

Dept. No.: PC-1

10 _____,
11 Deceased.
12
13

14 **PETITION FOR SPECIAL LETTERS OF ADMINISTRATION**

15 1. Petitioner, (your name) _____,
16 (hereinafter "Petitioner") appearing in Proper Person, respectfully alleges and shows as follows:

17 2. Petitioner files this request pursuant to Nevada Revised Statutes Chapter 140, and
18 requests that this Court enter an order authorizing the appointment of a Special Administrator
19 over the estate of (name of person who passed away) _____ (hereinafter
20 "Decedent").

21 3. Petitioner is the (your relation to the decedent) _____ of Decedent, ☐ is
22 ☐ is not over the age of 18 years of age, ☐ is ☐ is not a resident of the State of Nevada, and
23 resides at (your address) _____.

24 A copy of Petitioner's identification is attached hereto as **Exhibit A**.

1 4. Decedent, *(person who died)* _____, died on *(day,*
2 *month, and year of death)* _____. A certified copy of Decedent's death
3 certificate is attached as **Exhibit B**.

4 5. The Decedent was at the time of death, a resident of the County of Clark, State of
5 Nevada. Decedent's estate consists of real and/or personal property, and the exact value and
6 character of said property has not been determined.

7 6. Decedent knows of no other person authorized to care for the property belonging
8 to the estate. Because there is danger of the property being neglected and greatly damaged,
9 Petitioner requests that an appointment of a special administrator be made to take charge of and
10 care for the property of the estate.

11 7. Special Administration is needed for the following reason(s): *(state why you need to be*
12 *appointed Special Administrator)*

13 _____
14 _____
15 _____.

16 8. Petitioner is willing to act as Special Administrator of the estate to ascertain the
17 assets and protect the same and for the reasons stated in Number 3 above.

18 9. Petitioner *(check one)* ☐ has ☐ has never been convicted of a felony. Petitioner is
19 qualified under NRS 139.010 to serve as Special Administrator of the Estate.

20
21 ///

22
23 ///

10. The names, relationships, ages, and residence addresses of all the devisees, legatees, heirs, and next-of-kin of Decedent, so far as known to Petitioner, are:

(You must include the name, relationship, age (if under 18) and address of (1) decedent's legally married spouse, (2) all decedent's children; (3) all other devisees, legatees, heirs, and next-of kin. List all persons, regardless of age, even if estranged or out of state. Include all addresses; if unknown, include last known address or state "unknown.")

<u>Name</u>	<u>Relationship to Decedent</u>	<u>Age</u> <i>(If under 18, list age; if over 18, write "adult.")</i>	<u>Address</u>

☐ Check here if you have more people to include, and attach a continuation sheet.

11. The devisees, legatees, heirs, and next-of-kin of Decedent who are listed above either consent to the appointment of Special Administrator, and I have attached the appropriate Nomination of Special Administrator herein; or they have not consented, and an Affidavit in Support of Petition for Order Appointing Special Administrator explaining their lack of consent is herein attached as **Exhibit C**.

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WHEREFORE, Petitioner prays that he/she be appointed Special Administrator of the Estate of *(name of person who passed away)* _____, deceased, with all liquid assets placed in a blocked account, with authority to take possession of said property, and specifically to: *(state actions you plan to take as special administrator)*

DATED this _____ day of _____, 20____.

Respectfully submitted,

(signature)

(Your name)

(Your address)

(Your city, state, and zip)

(Your phone number)

(Your email)

PETITIONER, IN PROPER PERSON

VERIFICATION IN SUPPORT OF
PETITION FOR SPECIAL LETTERS OF ADMINISTRATION

STATE OF NEVADA)
)ss
COUNTY OF CLARK)

(Your name)_____, being first duly sworn, declares under penalty of perjury under the law of the State of Nevada that the foregoing and following is true and correct:

I am the Petitioner in the above-entitled action. I have read the foregoing Petition for Special Letters of Administration, and know the contents thereof. The Petition is true of my own knowledge except as to those matters that are stated on information and belief, and as to those matters, I believe them to be true.

DATED THIS _____ day of _____, 20____.

(Signature)

(Your name)

1 **LETT**

2 **EIGHTH JUDICIAL DISTRICT COURT**

3 **CLARK COUNTY, NEVADA**

4 In the Matter of the Estate of:

5 Case No.: P

6 Dept. No.: PC-1

6 _____,

7 Deceased.

**LETTERS OF SPECIAL
ADMINISTRATION**

8 On the *(insert date of Order Appointing Special Administrator)* _____ day of _____, 20____, the
9 Court entered an Order appointing *(your name)* _____ as Special
10 Administrator of the Decedent's Estate. The Order includes:

10 ☐ A directive for no bond;

11 ☐ A directive for the establishment of blocked accounts;

12 ☐ A directive for the posting of bond in the sum of \$ _____; or

13 ☐ A directive for both the establishment of blocked accounts for sums in excess of \$ _____
14 and the posting of bond in the sum of \$ _____.

15 The Special Administrator, having duly qualified, may act and has the authority and duties of Special
16 Administrator.

17 In testimony of which, I have this date signed these Letters and affixed the seal of the Court.

18 **CLERK OF COURT**

19 By: _____
20 Deputy Clerk Date

21 **OATH**

22 I, *(your name)* _____, whose mailing address is *(your address)*

23 _____, solemnly affirm that I will
24 faithfully perform according to law the duties of Special Administrator and that all matters stated in any petition or
25 paper filed with the Court by me are true of my own knowledge or, if any matters are stated on information and
belief, I believe them to be true.

ADMINISTRATOR

SUBSCRIBED AND AFFIRMED before me this

_____ day of _____, 20____.

County of _____ State of _____

1 _____
(Name)

2 _____
(Address)

3 _____
(City, State, Zip Code)

4 _____
(Telephone number/E-mail Address)

In Proper Person

6 **EIGHTH JUDICIAL DISTRICT COURT**

7 **CLARK COUNTY, NEVADA**

8 In the Matter of the Estate of:

Case No.: P
Dept. No.: PC-1

10 _____,
11 Deceased.

13 **NOMINATION OF SPECIAL ADMINISTRATOR**

14 I, (your name) _____, (your relationship to decedent) _____ of
15 decedent, whose address is (address) _____
16 declare under penalty of perjury that I hereby nominate (name of Petitioner) _____,
17 who resides at (Petitioner's address) _____,
18 to serve as Special Administrator of the Estate of (decedent's name) _____.

19 DATED THIS ____ day of _____, 20__.

20 Respectfully submitted,

21 _____
(signature)

22 _____
(Your name)

1 **ORDR**

2 _____
(Name)

3 _____
(Address)

4 _____
(City, State, Zip Code)

5 _____
(Telephone number/E-mail Address)

Petitioner, In Proper Person

6 **EIGHTH JUDICIAL DISTRICT COURT**

7 **CLARK COUNTY, NEVADA**

8
9 In the Matter of the Estate of:

Case No.: P

Dept. No.: PC-1

10 _____,
11 Deceased.
12
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14 **ORDER APPOINTING SPECIAL ADMINISTRATOR**

15 Upon submission of a verified Ex Parte Petition for Appointment of Special
16 Administrator and for Issuance of Special Letters of Administration, representing as follows:

17 1. That Decedent, *(name of person who died)* _____,
18 died intestate on the *(day, month, and year of death)* _____, in the County of
19 Clark, State of Nevada.

20 2. That Decedent was a resident of Clark County, Nevada, at the time of their death.

21 **NOW, THEREFORE, IT IS HEREBY ORDERED** that *(your name)* _____
22 _____ is appointed as Special Administrator and that Special Letters of
23 Administration be issued, without bond, to the Petitioner, *(your name)* _____,
24 upon taking the oath of office, for the purpose of administering the estate in accordance with

Nevada Revised Statutes Chapter 140.040, which provides as follows:

NRS 140.040 Powers, duties and immunity from liability for certain claims.

1. A special administrator shall:

(a) Collect and preserve for the executor or administrator when appointed all the goods, chattels and receivables of the decedent, and all incomes, rents, issues, profits, claims and demands of the estate.

(b) Take charge and management of the real property and enter upon and preserve it from damage, waste and injury.

2. A special administrator may:

(a) For all necessary purposes, commence, maintain or defend actions and other legal proceedings as a personal representative.

(b) Without prior order of the court, sell any perishable property of the estate, as provided in [NRS 148.170](#).

(c) Exercise such other powers as have been conferred by the order of appointment.

(d) Obtain leave of the court to borrow money or to lease or mortgage real property in the same manner as an executor or administrator.

3. A special administrator is not liable:

(a) To any creditor on any claim against the estate; or

(b) For any claim against the decedent except a claim involving wrongful death, personal injury or property damage if the estate contains no assets other than a policy of liability insurance.

IT IS FURTHER ORDERED: *(check one box)*

☐ All moneys received by this estate will be placed in a blocked account until further order by the court and proof of the blocked account shall be filed with the court within thirty (30) days from the date of entry of this court order.

☐ All moneys received by this estate will be placed in the attorney's trust account until further order by the court.

IT IS FURTHER ORDERED that any settlements of any lawsuits affecting the Decedent's estate are subject to this court's approval.

DATED this ____ day of _____, 20____.

DISTRICT COURT JUDGE

Respectfully submitted,

(signature)

(Your name)

PETITIONER, IN PROPER PERSON

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EXHIBIT A
(Petitioner's Identification)

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EXHIBIT B
(Death Certificate)

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EXHIBIT C
(Nominations and/or Affidavits in Support of Petition)

DISTRICT COURT CIVIL COVER SHEET

County, Nevada

Case No. _____

(Assigned by Clerk's Office)

I. Party Information *(provide both home and mailing addresses if different)*

Plaintiff(s) (name/address/phone):

Defendant(s) (name/address/phone):

Attorney (name/address/phone):

Attorney (name/address/phone):

II. Nature of Controversy *(please select the one most applicable filing type below)*

Civil Case Filing Types

Real Property		Torts
Landlord/Tenant <input type="checkbox"/> Unlawful Detainer <input type="checkbox"/> Other Landlord/Tenant Title to Property <input type="checkbox"/> Judicial Foreclosure <input type="checkbox"/> Other Title to Property Other Real Property <input type="checkbox"/> Condemnation/Eminent Domain <input type="checkbox"/> Other Real Property	Negligence <input type="checkbox"/> Auto <input type="checkbox"/> Premises Liability <input type="checkbox"/> Other Negligence Malpractice <input type="checkbox"/> Medical/Dental <input type="checkbox"/> Legal <input type="checkbox"/> Accounting <input type="checkbox"/> Other Malpractice	Other Torts <input type="checkbox"/> Product Liability <input type="checkbox"/> Intentional Misconduct <input type="checkbox"/> Employment Tort <input type="checkbox"/> Insurance Tort <input type="checkbox"/> Other Tort
Probate	Construction Defect & Contract	Judicial Review/Appeal
Probate <i>(select case type and estate value)</i> <input type="checkbox"/> Summary Administration <input type="checkbox"/> General Administration <input type="checkbox"/> Special Administration <input type="checkbox"/> Set Aside <input type="checkbox"/> Trust/Conservatorship <input type="checkbox"/> Other Probate Estate Value <input type="checkbox"/> Over \$200,000 <input type="checkbox"/> Between \$100,000 and \$200,000 <input type="checkbox"/> Under \$100,000 or Unknown <input type="checkbox"/> Under \$2,500	Construction Defect <input type="checkbox"/> Chapter 40 <input type="checkbox"/> Other Construction Defect Contract Case <input type="checkbox"/> Uniform Commercial Code <input type="checkbox"/> Building and Construction <input type="checkbox"/> Insurance Carrier <input type="checkbox"/> Commercial Instrument <input type="checkbox"/> Collection of Accounts <input type="checkbox"/> Employment Contract <input type="checkbox"/> Other Contract	Judicial Review <input type="checkbox"/> Foreclosure Mediation Case <input type="checkbox"/> Petition to Seal Records <input type="checkbox"/> Mental Competency Nevada State Agency Appeal <input type="checkbox"/> Department of Motor Vehicle <input type="checkbox"/> Worker's Compensation <input type="checkbox"/> Other Nevada State Agency Appeal Other <input type="checkbox"/> Appeal from Lower Court <input type="checkbox"/> Other Judicial Review/Appeal
Civil Writ		Other Civil Filing
Civil Writ <input type="checkbox"/> Writ of Habeas Corpus <input type="checkbox"/> Writ of Mandamus <input type="checkbox"/> Writ of Quo Warrant	<input type="checkbox"/> Writ of Prohibition <input type="checkbox"/> Other Civil Writ	Other Civil Filing <input type="checkbox"/> Compromise of Minor's Claim <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Other Civil Matters

Business Court filings should be filed using the Business Court civil coversheet.

Date

Signature of initiating party or representative

See other side for family-related case filings.