Register in Chancery
Kent County
New Castle County
Sussex County
38 The Green, Ste. 208
Dover, DE 19901
Wilmington, DE 19801
Georgetown, DE 19947
302-735-1930
302-856-5777
Register in Chancery
Sussex County
34 The Circle
Georgetown, DE 19947
302-856-5777

<u>Procedures for filing a Petition to Terminate Guardianship of the</u> <u>Person and Property Due to the Death of the Person with a Disability</u>

- The petition to terminate requires the following:
 - o A completed petition. The court clerk cannot complete the petition for you.
 - A copy of the guardianship bank statement(s) dated within the thirty (30) days prior to filing the petition.
 - o A copy of the death certificate for the person with a disability.
 - o A final accounting if the guardian(s) was/were required to file accountings.
 - A small estate affidavit or short certificate from the Register of Wills if there are remaining assets.
 - Kent County: 302-744-2330
 - New Castle County: 302-395-7800
 - Sussex County: 302-855-7875
 - The filing fee for the petition is \$15.00. We accept cash, check or money order (made payable to "Register in Chancery").
- The petitioner(s) is/are responsible for obtaining consents from the interested parties or sending notice of the petition to the interested parties by regular U.S. mail. Please see the instruction sheet within this packet for additional information.
- It is the guardian's responsibility to provide the Court with **photocopies** of all supporting documentation. If the Register in Chancery's office makes photocopies for you, we will charge a \$1.50 per page fee. When submitting your supporting documentation, it must be filed on regular 11 x 8.5 paper that can be easily scanned onto the computer.
- You may mail the completed petition to the Register in Chancery in the county where your guardianship case was established and the completed order will be mailed back to you.

Form CM75 Rev. 10/2023

In the Matter of:	:
	: C.M. #:
A person with a disability	:
· · · · · · · · · · · · · · · · · · ·	ianship of the Person and Property he Person with a Disability
1. Name of guardian(s):	
2. Date guardian(s) was/were appo	inted:
3. The person with a disability pass	sed away on:
4. Accounting	
a. □ A final accounting was	s filed with the Court on
<u>OR</u>	
b. ☐ The guardian(s) was/w	vere relieved of the requirement of filing
annual accountings by con	urt order dated
5. The guardian(s) hold(s) the follo	owing property for the decedent [list all
property including the name(s) of the b	bank(s), the account number(s) and the
palance in the account(s)]:	

6	has been appointed □Executor,
□Administrator or □Personal Represent	tative for the estate of the person with a
disability as indicated by □a Small Estat	e Affidavit or □Short Certificate.
Guardian	Co-Guardian (if applicable)
I declare under penalty of perjury	I declare under penalty of perjury
under the laws of Delaware that the	under the laws of Delaware that the
foregoing is true and correct.	foregoing is true and correct.
Executed on the day of	Executed on the day of
(month) (year).	(month) (year).
(Guardian's Printed Name)	(Co-Guardian's Printed Name)
(Guardian's Signature)	(Co-Guardian's Signature)
(Guardian's Address)	(Co-Guardian's Address)
(Guardian's Address)	(Co-Guardian's Address)
(Guardian's Phone Number)	(Co-Guardian's Phone Number)

INSTRUCTIONS FOR NOTIFYING INTERESTED PARTY(IES) OF PETITION TO TERMINATE

It is the petitioner's(s') responsibility to notify the interested party(ies) when a petition is filed with the Court.

If you do not know the address for an interested party, you must make every attempt to locate the address and file the enclosed affidavit of efforts to locate address of interested party with your petition (a separate affidavit is required for each individual).

Option 1 – Consent

Any interested party may sign a copy of the attached "Consent" form.

Option 2 – Send Notice

If any interested party does not sign the consent form, you must send them a copy of the attached "Notice of Petition". You may send the notice by regular U.S. Mail.

Any interested party who has not signed a consent must receive notice of your petition at least thirteen (13) days before the Court will consider the petition. This ensures that all interested parties have adequate time to contact the Court with any questions they may have or file any objection to the petition.

To be filed with the Court

You must file the following documents with the Court before the petition will be reviewed by a Judicial Officer:

- a. Any consent forms,
- b. The attached "Certificate of Mailing" (if any notices were sent), and
- c. Any affidavit(s) of efforts to locate address of interested party.

In the matter of:	:
,	: : C.M. #:
A person with a disability	:
<u>C</u>	ONSENT
I,	, whose relationship to the
person with a disability is that of	(e.g.
mother, brother), hereby consent to the	ne petition to terminate.
I declare under penalty of perjury und	ler the laws of Delaware that the foregoing is
true and correct.	
Executed on the day of	(month) (year).
	(Printed Name)
	(Signature)
Address:	
Phone Number:	

☐Register in Chancery Kent County 38 The Green, Ste. 208 Dover, DE 19901 302-735-1930	☐Register in Chancery New Castle County 500 N. King St., Ste. 11600 Wilmington, DE 19801 302-255-0544	☐ Register in Chancery Sussex County 34 The Circle Georgetown, DE 19947 302-856-5777
IN THE MATTER OF:	: : C.M. # _	
A person with a disability	: :	
<u>NOTICI</u>	E OF PETITION TO TERM	<u>IINATE</u>
Dear Interested Parties:		
This is a notice that l	[am/we are filing a petition to	terminate the
guardianship due to the dea	ath of the person with a disabi	lity. Notice is being sent to
you as an interested party.		
If you object to the p	etition, you must immediately	file a written objection
with the Register in Chance	ery's Office that has been mar	ked above. If you do not
file a written objection with	nin thirteen (13) days of the o	late of this notice, any
objections will be deemed	waived.	
Petitioner's Signature	Co-l	Petitioner's Signature
Datade		

IN THE MATTER OF:		:
A person with a disability	,	: C.M. #
<u>CERT.</u>	IFICATI	E OF MAILING
The guardian(s) mailed or	n this date	e, a "Notice of
Petition" to the following interes	sted parti	es:
Name	Addres	SS
Guardian		Co-Guardian (if applicable)
I declare under penalty of perju	_	I declare under penalty of perjury
under the laws of Delaware that foregoing is true and correct.	t the	under the laws of Delaware that the foregoing is true and correct.
	1 C	
Executed on the (month)	_ day of (vear).	Executed on the day of (month) (year).
(_ ()/-	(333333) (7333).
(Guardian's Printed Name)		(Co-Guardian's Printed Name)
(Guardian's Signature)		(Co-Guardian's Signature)

IN THE MATTER OF:	:
,	: : C.M. #
A person with a disability	:
	FFORTS TO LOCATE NTERESTED PARTY
I/We,	, petitioner(s) in the above
matter, hereby confirm that I/We have	been unable, after exercising reasonable
diligence, to locate an address for interes	ested party,
[Name of interested party or missing pe	erson], in order to provide that interested
party with notice of the filing of the pet	ition.
My/Our last contact with	[Name of
interested party or missing person] was	on or around
[month/year] and to the best of my/our	knowledge, the last contact he/she had with
the person with a disability was on or a	round[month/year].
My/Our efforts have included the	e following [please check all that apply]:
☐ performing an internet search	for the address of the interested party;
☐ asking other interested parties	if they know of the missing person's
current whereabouts;	
\square messaging the missing person	through electronic means;
□ Other:	

If I/We subsequently locate the missing interested party, I/We will notify the Court of his/her address.

Petitioner	Co-Petitioner
STATE OF	_ :
COUNTY OF	:
This instrument was acknowledged before	re me on this day of
, 20 by	[Name of affiant].
Pursuant to Court of Chancery Rule 1781	B, the use of an Unsworn Declaration (see
Pursuant to Court of Chancery Rule 178	B. the use of an Unsworn Declaration (see
below) is permitted rather than the notar Petitioner	y requirement. Co-Petitioner (if applicable)
below) is permitted rather than the notar	y requirement.
below) is permitted rather than the notary Petitioner I declare under penalty of perjury under the laws of Delaware that the	y requirement. Co-Petitioner (if applicable) I declare under penalty of perjury under the laws of Delaware that the
Petitioner I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct. Executed on the day of	Co-Petitioner (if applicable) I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct. Executed on the day of