

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

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 Street, 7th Floor
Wilmington, DE 19801
302-255-0544

Register in Chancery
Sussex County
34 The Circle
Georgetown, DE 19947
302-856-5777

Petition to Transfer Guardianship from the State of Delaware

- The petition must be filled out completely.
 - The court clerk cannot complete the petition for you.
 - The guardian will need to have their signature notarized. If you appear in the Register's Office with identification and the correct paperwork, your signature can be notarized by a court clerk in the Register's Office.
- The filing fee for the petition is \$50.00 plus an additional \$2.00 per page scanning fee. Payment must be received at the time of filing or the petition will not be accepted by our office. We accept cash, check or money order (made payable to the "Register in Chancery"). If the Register in Chancery's office makes photocopies for you, we will charge \$1.50 per page. When submitting your supporting documentation, it must be filed on regular 11 x 8.5 paper that can be easily scanned onto the computer and it must be one-sided.
- The guardian is responsible for obtaining consents from the interested parties or sending notice of the petition to the interested parties. Please review the enclosed instruction sheet for additional instructions on notifying the interested parties.
- If the petition is approved, the guardian will be given a provisional order to transfer the guardianship. You will need to contact the Court in the State where the person with a disability resides to start the guardianship process in that State. After you are appointed guardian of the person with a disability in the State where the person with a disability resides, you will file a **certified copy** of that order with the Court of Chancery so the Delaware guardianship can be closed. If you file accountings with the Court, a final accounting may still be required.

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

In the matter of:

_____,
A person with a disability

:
:
:
:
:

C.M. #: _____

Petition to Transfer Guardianship from Delaware

1. Information about the current guardian(s)

a. Name of guardian(s): _____

b. Date guardian(s) was/were appointed: _____

c. Guardian(s) current address(es): _____

2. Information about the person with a disability:

a. Current address: _____

b. The person with a disability has resided at this current address since

3. The guardian(s)

a. ☐ Is/Are required to file accountings and the last accounting was
filed on _____ or

b. ☐ Was/Were relieved of the requirement of filing accountings by
Court Order dated _____.

4. The guardian(s) filed the last annual update and medical statement on

_____ stating a guardianship is still necessary.

5. The names and addresses of any potentially interested party which includes the spouse and any next-of-kin who would be entitled to inherit through the estate of the person with a disability if that person died intestate. If an interested party is a minor, please provide the name and contact information for the minor's parent or other guardian as the parent or guardian will require notice.

Name of next-of-kin	Relationship to person with a disability	Address and Phone number of next-of-kin	Age

WHEREFORE, guardian(s) respectfully seek(s) a provisional order from this Court granting the Petition to Transfer the Guardianship from Delaware and

directing the guardian(s) to petition for guardianship in the State of

_____.

Signature section for guardian	Signature section for any co-guardian
I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct.	I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct.
Date: _____	Date: _____
Print name: _____	Print name: _____
Signature: _____	Signature: _____
Address: _____ _____	Address: _____ _____
Phone Number: _____	Phone Number: _____

Instructions for Notifying Interested Parties of Petition

It is the petitioner's responsibility to notify the interested parties when a petition is filed with the Court.

How to Notify the Interested Parties

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.

Unknown Address of an Interested Party

If you do not know the address of an interested party, you must make reasonable efforts to locate it. If you are unable to locate the address, file an Affidavit of Efforts to Locate Address of Interested Party (Form CM6) with the court.

- File a separate affidavit for each interested party whose address is unknown.
- If a Form CM 6 has already been filed for an interested party, you do not need to file another one.
- If you later learn the interested party's address, promptly notify the court.

Form CM6 is available from the Register's Office or on the court's website.

Documents to File 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.

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_____,
A person with a disability

:
:
:
:

C.M. #: _____

**Consent of the Interested Party to the Petition to Transfer the Guardianship
from Delaware**

I, _____ [name of interested party],
whose relationship to the person with a disability is that of
_____ [e.g. mother, brother], hereby consent to the
Petition to Transfer the guardianship from the State of Delaware to the State of
_____ without further notice.

Date: _____

Print name: _____

Signature: _____

Address: _____

Phone Number: _____

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IN THE MATTER OF:

_____,
A person with a disability

:
:
: C.M. # _____

Notice of Petition to Transfer Guardianship from Delaware

Dear Interested Parties:

This is a notice that I am/we are petitioning to transfer the guardianship of the person with a disability from Delaware to _____. If you object to the petition, you must file a written objection with the Register in Chancery's Office that has been marked above within thirteen days of the date of this notice.

Petitioner's signature: _____

Co-Petitioner's signature: _____

Date: _____

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

In the matter of:

_____,
A person with a disability

:
:
:
:
:

C.M. #: _____

Certificate of Mailing

The petitioner mailed the “Notice of Petition to Transfer Guardianship from Delaware” on _____ [date] to the following individuals:

Name of Interested Party	Address of Interested Party

Signature section for guardian	Signature section for any co-guardian
I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct.	I declare under penalty of perjury under the laws of Delaware that the foregoing is true and correct.
Date: _____	Date: _____
Print name: _____	Print name: _____
Signature: _____	Signature: _____