

# Gila River Indian Community Court

## PETITION FOR APPOINTMENT OF ADMINISTRATOR AND PROBATE OF ESTATE

**You may use this form for the following reasons:**

1. You are a relative to a person who died.
2. The person who died had a will or did not have a will.
3. The person who died requires someone to take care of the person's personal business, i.e., settle a decedent's estate.
4. You request appointment as the person's Administrator.

**The following definitions may be used in this form:**

1. **Administrator** means a person appointed by the Court with the powers and duties under law to act on behalf of the estate.
2. **Decedent** means the person who died.
3. **Estate** means the assets and liabilities of a deceased person at the time of death.
4. **Petitioner** means the person requesting appointment as Administrator.
5. **Probate** means the legal process that affects the distribution of the deceased person's estate that is applied to:
  - a. Determine the heirs;
  - b. Determine the validity of wills and determine persons who receive property;
  - c. Determine claims against the estate; and
  - d. Order the deceased person's property to pass under a will.
7. **Spouse** means a party to a lawful marriage recognized by any jurisdiction. It shall not include a party to a common law marriage unless the marriage is recognized by the jurisdiction in which the arrangement was entered.
6. **Will** means a written document executed with the required formalities and intended to facilitate the passage of the deceased person's property upon death.

**How to apply for appointment as Administrator and begin probate:**

1. You must decide if you are the right person to be Administrator. Remember you are legally responsible for taking care of the Decedent's personal affairs. An Administrator must perform certain duties and responsibilities, and may have to appear in Court several times and provide reports. An

Administrator may have to talk to entities such as government agencies, financial institutions, or medical or health care establishments. An Administrator may have to gather the Decedent's assets and debts, inventory the Decedent's property and contact family members who may be eligible to inherit. You should talk to your family about being appointed Administrator. Your family should try to agree on who should be appointed Administrator.

2. There are legal requirements a person must meet before appointment as Administrator. These requirements are listed in Gila River Indian Community Code (GRICC) Title 10, Probate Code. An Administrator must be:

- Over 18 years of age;
- The spouse, adult child, parent, brother or sister, or relative of the Decedent;
- Of sound mind;
- Not convicted of a felony;
- Not convicted of a misdemeanor involving moral turpitude. Crimes of moral turpitude are defined under GRICC Title 1, Chapter 2, Section 1.201(B). These crimes include: homicide, sexual assault, kidnapping, burglary, robbery, theft, arson, theft by extortion, forgery, fraud, fraudulent use of a credit card, telecommunications fraud, production or delivery of marijuana, possession or sale of narcotics, bribery, perjury, failure to obey a lawful order of the court, driving while intoxicated, tampering with a public record, prostitution, promotion of prostitution, indecent exposure, sexual abuse, sexual conduct with a minor, molestation of a child, dangerous use of explosives, abandonment of a child, child non-support, child abuse, contributing to the delinquency of a minor, incest, domestic violence and attempt, conspiracy or facilitation of any of the above listed crimes; and the same or similar offenses under state or federal law.

3. The probate law lists those who are eligible to serve as Administrator, in order of priority:

- Person(s) named to serve as Administrator(s) in the Decedent's will;
- Surviving spouse;
- Children of the Decedent;
- Father or mother of the Decedent;
- Brother or sister of the Decedent;
- Grandchildren of the Decedent;
- Nephew or niece of the Decedent; and
- Beneficiary of the Decedent's probate or non-probate assets.

If you apply to be appointed Administrator and you are lower on the priority list, you must obtain consent from other family members. For instance, if you wish to be administrator over your parent's estate, you must obtain the consent of your brothers and/or sisters. Talk to your family and ask them if they agree to your appointment as Administrator. Have your family members review and sign the Consent to Appointment of Administrator form. Each family member must sign one Consent to Appointment of Administrator form. You may make copies of the form. The form must be notarized or signed in front of a Court Clerk. It is your responsibility to gather all the consent forms and submit the forms along with your petition. The Court cannot process the petition without all consent forms.

4. Complete the Petition for Appointment of Administrator and Probate of Estate (petition) if you decide to seek appointment as Administrator. Answer all questions. Type or use ink only.

5. Attach a copy of the Decedent's death certificate. NOTE: The Court will not process the petition without a death certificate.
6. Attach a copy of the Decedent's will, if one is available.
7. If you are the Decedent's spouse, attach a copy of your marriage license or other document that shows you were married to the Decedent.
8. If you are the Decedent's child, attach a copy of your birth certificate or other document that shows you are the Decedent's child.
9. If you are the Decedent's parents, attach a copy of the Decedent's birth certificate or other document that shows you are the Decedent's parent.
10. If you are the Decedent's brother or sister, attached a copy of your birth certificate and the Decedent's birth certificate to show you share the same parent(s).
11. You must provide the names and addresses of all relatives listed on the petition. Your petition may be returned if you do not provide this information. Attach a separate page if you need more room. The Court will send notice to those relatives that you have requested to be appointed Administrator and the Court hearing's date and time. These relatives may attend the hearing if they wish.
12. Sign the petition before a notary public before you submit to the Court OR sign before a Court Clerk. You must pay the filing fee when you submit your petition to the Court. The filing fee is non-refundable.
13. The Court will schedule a hearing date and time for a judge to review your petition and issue any orders. You must attend this hearing or the Court will dismiss your petition. The Court will notify the relatives you list on the petition of the hearing's date and time.
14. If the Court approves your petition, you will be required to perform several duties under the law. These duties are outlined in a Court order. Remember, even if you are appointed as Administrator, you DO NOT inherit all the Decedent's property. The Court will determine at a future hearing who will inherit if there is no will and the Court will approve distribution of the estate to eligible heirs. You may be found in contempt of Court if you do not fulfill your duties, misuse your authority as Administrator or fail to report to the Court. The Court may also remove you as Administrator.
15. Contact the Court if you have any questions by email, [court.questions@gric.nsn.us](mailto:court.questions@gric.nsn.us). Court staff cannot give legal advice but can answer questions about filing requirements or procedure.

Sacaton Court  
Phone: 520-562-9860  
Fax: 520-562-9867

Westend Court  
Phone: 520-562-9862  
Fax: 520-562-9869

**Please keep these instructions. Do not attach to the petition.**

IN THE COURT OF THE GILA RIVER INDIAN COMMUNITY  
STATE OF ARIZONA

**Sacaton Court:** 721 W. Seed Farm Road, P.O. Box 368, Sacaton, Arizona 85147  
520-562-9860 (P), 520-562-9867 (F)

**Westend Judicial Center:** 4751 W. Pecos Road, Laveen, Arizona 85339  
520-562-9862 (P), 520-562-9869 (F)

**E-mail:** courtpublicmailbox@gric.nsn.us

This box for Court use ONLY

**IN THE MATTER OF THE ESTATE:**

**CASE NO.** \_\_\_\_\_

\_\_\_\_\_  
Decedent's (Person who died) full, legal name

**PETITION FOR APPOINTMENT OF  
ADMINISTRATOR AND PROBATE  
OF ESTATE  
GRIC CODE TITLE 10**

\_\_\_\_\_  
Decedent's Date of Death

1. The Decedent is: ☐ Enrolled member of the Gila River Indian Community;

Tribal Enrollment Number: \_\_\_\_\_

☐ Eligible for enrollment in the Gila River Indian Community (not already enrolled); or

☐ Enrolled in another federally recognized tribe.

Which tribe: \_\_\_\_\_

2. Is a copy of the Decedent's death certificate attached: ☐ YES ☐ NO

3. Did the Decedent have a will: ☐ YES ☐ NO

4. Is the Decedent's spouse alive: ☐ YES ☐ NO 4a. ☐ Decedent was not married at the time of death

If YES, full, legal name of spouse: \_\_\_\_\_

Spouse's mailing address: \_\_\_\_\_

5. Are the Decedent's adult child(ren) alive: ☐ YES ☐ NO 5a. ☐ Decedent had no children

If YES, provide child(ren) full, legal name(s) and mailing address(es):

Child 1: \_\_\_\_\_

Child 2: \_\_\_\_\_

Child 3: \_\_\_\_\_

Child 4: \_\_\_\_\_

Child 5: \_\_\_\_\_

Child 6: \_\_\_\_\_

(Add a sheet for additional names.)

6. Are the Decedent's parent(s) alive: ☐ YES ☐ NO

If YES, provide parent(s) full, legal name(s) and mailing address(es):

\_\_\_\_\_

7. Are the Decedent's brother(s) or sister(s) alive: ☐ YES ☐ NO 7a. ☐ Decedent had no siblings

If YES, provide brother(s) or sister(s) full, legal name(s) and mailing address(es):

☐ Brother ☐ Sister: \_\_\_\_\_

☐ Brother ☐ Sister: \_\_\_\_\_

☐ Brother ☐ Sister: \_\_\_\_\_

☐ Brother ☐ Sister: \_\_\_\_\_

☐ Brother ☐ Sister: \_\_\_\_\_

8. Are the Decedent's grandchild(ren) alive: ☐ YES ☐ NO 8a. ☐ Decedent had no grandchildren

If YES, grandchild(ren) full, legal name(s) and mailing address(es):

Grandchild 1. \_\_\_\_\_

Grandchild 2. \_\_\_\_\_

Grandchild 3. \_\_\_\_\_

Grandchild 4. \_\_\_\_\_

Grandchild 5. \_\_\_\_\_

9. Any other relatives of the Decedent alive: ☐ YES ☐ NO

If YES, specify relationship (aunt, uncle, niece, nephew, etc.), provide full, legal name(s) and mailing address(es):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

10. Provide a general description of the Decedent's estate (assets and liabilities of the person at the time of death):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. Provide a general description of the business of the Decedent's estate you (Petitioner) wish to take care of:

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12. Did the Decedent have a home/residence located on the reservation? ☐ YES ☐ NO

- 12a. If YES, is the home/residence located on a: ☐ Tribal/Community Homesite  
☐ Allotted/Bureau of Indian Affairs Homesite  
☐ Other or Do Not Know

12b. If YES, what is the physical address and district of home/residence:

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12c. If YES, list the name and relationship to Decedent of everyone who lives in the home/residence:

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13. Are there any other probate cases or Petitions for Appointment of Administrator cases involving the Decedent pending in any other court?

☐ YES ☐ NO

If YES, what state and court:\_\_\_\_\_

14. Your (Petitioner) full, legal name:\_\_\_\_\_

15. Your (Petitioner) date of birth:\_\_\_\_\_

16. Your (Petitioner) mailing address:\_\_\_\_\_

17. Your (Petitioner) physical address:\_\_\_\_\_

18. Your (Petitioner) home and cell phone:\_\_\_\_\_

19. Your (Petitioner) email address:\_\_\_\_\_

20. Your (Petitioner) relationship to the Decedent:

- |   |  |
|---|--|
| <input type="checkbox"/> Surviving spouse of the Decedent   | <input type="checkbox"/> Adult child of the Decedent       |
| <input type="checkbox"/> Parent of the Decedent             | <input type="checkbox"/> Brother or sister of the Decedent |
| <input type="checkbox"/> Grandchild of the Decedent         |  |
| <input type="checkbox"/> Other relationship (specify):_____ |  |

21. Are you (Petitioner) over 18 years of age: ☐ YES ☐ NO

22. Have you (Petitioner) ever been convicted of a felony crime: ☐ YES ☐ NO

If YES, what crime, court and date: \_\_\_\_\_

23. Have you (Petitioner) ever been convicted of a misdemeanor crime: ☐ YES ☐ NO

If YES, what crime, court and date: \_\_\_\_\_

24. Have you (Petitioner) ever been judged mentally unsound: ☐ YES ☐ NO

If YES, what court and date: \_\_\_\_\_

I, \_\_\_\_\_ (Petitioner's name), being duly sworn, and says: That I am the Petitioner in the above entitled action and that I have read the above petition and state that the statements in the petition are accurate and true to the best of the Petitioner's knowledge and belief.

STATE OF: \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner

COUNTY OF: \_\_\_\_\_

Subscribed and sworn to or affirmed before this \_\_\_\_\_ (date) by \_\_\_\_\_

(Notary Seal)

\_\_\_\_\_  
Clerk of the Court/Notary Public

**IN THE COURT OF THE GILA RIVER INDIAN COMMUNITY  
STATE OF ARIZONA**

**Sacaton Court:** 721 W. Seed Farm Road, P.O. Box 368, Sacaton, Arizona 85147  
520-562-9860 (P), 520-562-9867 (F)

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**E-mail:** courtpublicmailbox@gric.nsn.us

This box for Court use ONLY

**IN THE MATTER OF THE ESTATE:**

**CASE NO.** \_\_\_\_\_

\_\_\_\_\_  
Decedent's (Person who died) full, legal name

**CONSENT TO APPOINTMENT OF  
ADMINISTRATOR**

\_\_\_\_\_  
Decedent's Date of Death

**THE PERSON SIGNING THIS DOCUMENT STATES AS FOLLOWS:**

1. My relationship to the Decedent is:

☐ Surviving spouse of the Decedent

☐ Adult child of the Decedent

☐ Parent of the Decedent

☐ Brother or sister of the Decedent

☐ Grandchild of the Decedent

☐ Other relationship (specify): \_\_\_\_\_

2. I understand that \_\_\_\_\_ (Petitioner's Name) has requested to be appointed Administrator of the Decedent's estate under the Gila River Indian Community Probate Code.

3. I give up my right to be appointed as Administrator of the Decedent's estate. I understand I DO NOT give up my rights as an heir or beneficiary to the Decedent's estate.

4. I consent to the appointment of \_\_\_\_\_ (Petitioner's Name) as Administrator.

\_\_\_\_\_  
Printed Name of Person Signing this Form      Date

\_\_\_\_\_  
Signature of Person Signing this Form      Date

STATE OF: \_\_\_\_\_

COUNTY OF: \_\_\_\_\_

Subscribed and sworn to or affirmed before this \_\_\_\_\_ (date) by \_\_\_\_\_

(Notary Seal)

\_\_\_\_\_  
Clerk of the Court/Notary Public