

BURLINGTON COUNTY SURROGATE'S COURT
50 RANCOCAS ROAD, 1ST FLOOR, MOUNT HOLLY NJ 08060
TEL. (609) 265-5005 FAX (609) 261-4511
surrogates@co.burlington.nj.us

ADMINISTRATION INFORMATION SHEET – DUE TO COVID-19 CORONAVIRUS
ALL ADMINISTRATORS PLEASE COMPLETE THIS FORM

Name of Decedent: _____ SS# _____

Address: _____

Date of Death: _____

Name of Administrator _____ Relationship _____

Address _____

Telephone # _____ SS# _____

Email Address: _____

Name of Co-Administrator _____ Relationship _____

Address _____

Telephone # _____ SS# _____

Email Address: _____

| | | | |
|--------------------|---------------------|----------------|----------------------|
| NEXT OF KIN | RELATIONSHIP | ADDRESS | AGE OF MINORS |
|--------------------|---------------------|----------------|----------------------|

ASSETS:

Vehicles (List Year, Make, Model, Vin# and Value) _____

Banks (List Name of Bank, Account # and Balance) _____

Stock (List Value) _____

Real Estate (List Address and Fair Market Value) _____

DEBTS:

Loans _____

Credit Cards _____

Mortgage _____

Total Number of Short Certificates Requested: _____

Name of Attorney of Record, if any _____

Address _____

Telephone # _____ Fax # _____

Email Address: _____

**FOR USE AS FACT SHEET TO BE MAILED CERTIFIED OR FED EX TO
OFFICE IN ADVANCE OF APPEARANCE ALONG WITH DEATH
CERTIFICATE. WE WILL CALL YOU TO MAKE APPOINTMENT.
THANK YOU!**