Approved, SCAO JIS CODE: AOV/OOV

STATE OF MICHIGAN PROBATE COURT COUNTY OF

APPLICATION AND ORDER FOR APPOINTMENT OF OUT-OF-STATE CONSERVATOR

NO.

Estate of			, a prof	ected individu	Ial XXX-XX- Last four digits of SSN
I. I,				, am inte	erested in this matter and
Name					
make this application as the i	ndividual's conservator a	appointed, qualifie	d, and serving in	good standing	g in another state.
2. I am not aware of any conser	vatorship or pending pet	itions in this state f	or a conservator	ship of the pro	otected individual.
3. The individual was born		, res	ides in		County
at					
Address					
City, state, zip		and has prop	perty in	nd state or other	jurisdiction .
☐ The individual is a citizen o	or the following foreign co	ountry.			
4. An action within the jurisdic	ction of the family division	of circuit court invo	lving the family o	r family memb	ers of the above individual
	,				
has been previously filed ir	n	Cou	rt, Case Number		, was
assigned to Judge			_, and □ rem	ains 🗌 is no	o longer pending.
=	er of attorney. (Specify na dian. (Specify name and ad esentative payee for soc	ldress below.)		s below.)	
Name and address					
5. The protected individual has a spouse child(ren) if no child(ren) or descenda if none of the above, presu none of the above. (Notify the MI 48909.)	☐ descendants ants of deceased child(rumptive heirs whose nam	whose name(s) en), parents whose ne(s) and address(and address(es e name(s) and ac es) are listed bel) are listed be ddress(es) are ow.	low. e listed below.
NAME	RELATIONSHIP	ADDRESS AND TELEPHONE NUMBER		BER	
		Street address			
		City	State	Zip	Telephone no.
		i .	1	1	
		Street address			
		Street address City	State	Zip	Telephone no.

(SEE SECOND PAGE)

USE NOTE: If this form is being filed in the circuit court family division, please enter the court name and county in the upper left-hand corner of the form.

Do not write below this line - For court use only

7. None of the persons named above is u	ınder any legal inca	pacity except	
Name, incapacity, and representative of the pe	erson. if anv		
8. The individual is currently found at ${\text{Addre}}$	ess or location		Telephone no.
9. The individual \square is \square is not en	titled to receive Vet	erans Administration ben	efits. Claimant number
10. The individual to be protected has an	estate approximate	ly valued at:	
\$\$ Real property \$_Pers		\$	\$
11. The individual to be protected is received.			Monthly Income
☐ Social Security \$		Ueterans Administration	on \$
Retirement\$		Other	\$
12. Name of court that appointed conservator		State	Telephone no.
appointed the conservator for the follow	wing reason(s):		
/s/ Attorney signature		Date /s/	
Attorney name (type or print)	Bar no.	Applicant signature	
Address		Address	
City, state, zip	Telephone no.	City, state, zip	Telephone no.
	ORDER APPOIN	ITING CONSERVATOR	
An application for appointment of a con of the conservator's letters of appointment			this court along with an authenticated copy appointment in this state.
ITIS ORDERED:			
2			is appointed temporary conservator of
Name of conservator (type or print)			
Name of protected individual (type or print)			, a protected individual, in this state.
Date		Judge	Bar no
	NOTICE TO INT	TERESTED PERSONS	

 $Unless \, an \, objection \, to \, the \, above \, appointment \, is \, filed \, with \, the \, court \, within \, 28 \, days \, of \, the \, date \, of \, the \, order, \, the \, temporary \, conservator \, shall \, be \, appointed \, full \, conservator \, of \, the \, protected \, individual.$

NOTE TO APPLICANT: Within 14 days of your appointment as the temporary conservator, you must send, by first-class mail, a copy of this application, order, and notice to all interested persons and file proof of service with this court.