

**PETITION TO REGISTER/ FILE WILL ONLY  
REGISTER OF WILLS OFFICE  
GREENE COUNTY, PENNSYLVANIA**

Petitioner(s), \_\_\_\_\_, who is /are 18 years of age or older, petitions to register/file the Last Will of the decedent named below, and in thereof aver(s) the following:

**Decedent's Information**

Name: \_\_\_\_\_ File No. \_\_\_\_\_  
 a/k/a: \_\_\_\_\_ (Assigned by Register)  
 a/k/a: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Date of Death \_\_\_\_\_ Age at death: \_\_\_\_\_

Decedent was domiciled at death in \_\_\_\_\_ County, \_\_\_\_\_ (State) with his/her last principal residence at: \_\_\_\_\_

Street address, Post Office, and Zip Code City, Township or Borough County

Decedent died at \_\_\_\_\_  
 Street address, Post Office and Zip Code City, Township or Borough County

Real Estate in Pennsylvania situate at: \_\_\_\_\_  
 (Attach additional sheets, if necessary) Street address Post Office and Zip Code City, Township or Borough County

**Petition to Register / File Will Only**

Date of the Will: \_\_\_\_\_ and Codicil(s) thereto dated \_\_\_\_\_  
 Will presented on behalf of:

| Name/Company | address | phone number | relationship |
|--------------|---------|--------------|--------------|
|--------------|---------|--------------|--------------|

**OATH OF PETITIONER**

COMMONWEALTH OF PENNSYLVANIA } SS:  
 COUNTY OF GREENE }

|                                      |                               |
|--------------------------------------|-------------------------------|
| Petitioner(s) Printed Name / Company | Petitioner(s) Printed Address |
| _____                                | _____                         |
| _____                                | _____                         |
| _____                                | _____                         |

The Petitioner(s) above-named swear(s) or affirm(s) the statements in the foregoing Petition are true and correct to best of their knowledge and belief.

Sworn to or affirmed and subscribed before \_\_\_\_\_ Date \_\_\_\_\_  
 this \_\_\_\_\_ day of \_\_\_\_\_ Date \_\_\_\_\_  
 By: \_\_\_\_\_ Date \_\_\_\_\_  
*Register*

**DECREE OF THE REGISTER**

Estate of \_\_\_\_\_ Date of Death: \_\_\_\_\_  
a/k/a \_\_\_\_\_ Social Security no.: \_\_\_\_\_

AND NOW, \_\_\_\_\_, in consideration of the foregoing Petition,  
Satisfactory proof having been presented before me, IT IS DECREED that the instrument(s)  
dated \_\_\_\_\_ described in the Petition be Registered/Filed of record as the last Will  
(and Codicil (s)) for the Decedent.

\_\_\_\_\_  
Register of Wills, Greene County, PA

**FEES:**

WILL.....\$ \_\_\_\_\_  
CODICIL.....\$ \_\_\_\_\_  
ADD'L PAGES.....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_  
.....\$ \_\_\_\_\_  
TOTAL.....\$ \_\_\_\_\_