

**PROBATE COURT OF BUTLER COUNTY, OHIO**  
**JOHN M. HOLCOMB, JUDGE**

**IN THE MATTER OF THE**  
**WRONGFUL DEATH TRUST                      TESTAMENTARY TRUST**  
**SPECIAL NEEDS TRUST                      MINOR TRUST**

**OF \_\_\_\_\_ DECEASED GRANTOR**  
**CASE NO. \_\_\_\_\_**

**APPLICATION FOR APPOINTMENT OF TRUSTEE**

Now comes \_\_\_\_\_, a resident of \_\_\_\_\_  
and hereby makes application to be appointed as Trustee(s) of the:

Wrongful Death Trust established for the benefit of \_\_\_\_\_ as  
a result of the death of \_\_\_\_\_ Estate Case No. \_\_\_\_\_

Testamentary Trust created by Item \_\_\_\_\_ of the Last Will and Testament (and Codicil/s) in the  
Estate of \_\_\_\_\_ being Estate Case No. \_\_\_\_\_

Special Needs Trust created by \_\_\_\_\_ on \_\_\_\_\_  
being Case No. \_\_\_\_\_

Minor Trust created by \_\_\_\_\_ on \_\_\_\_\_  
being Case No. \_\_\_\_\_

**A copy of the Will (and Codicil/s) or Trust Agreement is attached.**

Applicant states that the estimated property of said trust estate is as follows:

Personal Property	\$ _____
Real Property	\$ _____
Annual Rental Income	\$ _____
Other Annual Income	\$ _____
Total	\$ _____

Applicant further states that:

Bond is dispensed with by the instrument;  
Bond is dispensed with by Law;  
Bond in the sum of \$ \_\_\_\_\_ is attached.

\_\_\_\_\_  
Attorney for Applicant

\_\_\_\_\_  
Typed or Printed Name of Attorney

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip Code

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Attorney Registration No. \_\_\_\_\_

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Typed or Printed Name of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip Code

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Applicant Email Address