

IN THE CIRCUIT COURT FOR THE 14th JUDICIAL CIRCUIT
 PROBATE DIVISION

ESTATE OF : _____ Case No. _____

References: Florida Statute 735.206, 733.2121 and Rule 5.241 and 5.530

AFFIDAVIT OF DILIGENT SEARCH AND INQUIRY FOR CREDITORS rvd 4/2019

1	WHO ARE YOU?
	Name _____ Address _____
	I am not _____ I am _____ related to the decedent as follows: _____
2.	I have made diligent search and inquiry to discover the names and addresses of all creditors of the decedent including taking the following action:
	_____ Medical Bills: I have determined that the decedent has no unpaid medical bills including at local hospitals.
	_____ Medical Bills: I have determined that the decedent has unpaid medical bills
	At the time of death the decedent was 55 years of age or older : YES _____ NO _____
	If YES, Notice has been provided to the Agency for Health Care Administration. YES _____ NO _____
	_____ Taxes: I have determined that neither the decedent's estate nor the decedent owe taxes. YES _____ NO _____
	_____ Billing Statements: I have checked the decedent's last known mailing address, or mailing P.O. Box for billing statements
	_____ Please note any other action taken to discover creditors

<i>UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AFFIDAVIT OF DILIGENT SEARCH AND THE FACTS STATED THEREIN ARE TRUE</i>		
<i>Affiant's Signature:</i>	<i>Print Name of Affiant</i>	
<i>Affiant's Address:</i>		
<i>Subscribed and Sworn before me this _____ day of _____ 20_____</i>		
State of Florida, County of Bay	Notary Signature or Deputy Clerk	
Personally Known ()	Print, type, or stamp commissioned name of Notary or Deputy Clerk	
Affiant Produced Identification () Type of ID:		
I certify that I have personally reviewed the foregoing checklist with my client.		
Attorney for Petitioner _____		Date _____
Mailing Address _____		