

Probate Pre-Approval Bond Form

CBS AGENCY, INC.
(a Subsidiary of the Columbus Bar Association)
175 S. Third St., Suite 1100, Columbus, OH 43215
(614) 340-2076 · Fax: (614) 340-2080 · bonds@cbalaw.org

CASE NAME: _____
CASE NUMBER: _____
COUNTY: _____

ESTATE or **TRUST** or **GUARDIANSHIP***

ESTATE: DATE OF DEATH: _____

***GUARDIANSHIP:** MINOR: DOB: _____
INCOMPETENT: DOB: _____
HEALTH STATUS: _____

Has Applicant Ever Filed Bankruptcy? Yes No
Is this an Additional Bond Request? Yes No
Estate: Has bond been filed before in this case? Yes No
Estate: Has this previously been bonded as a Guardianship? Yes No
Estate: Do any heirs disagree with appointment of applicant? Yes No
Guardianship-Minor: Are funds to be used for care and support? Yes No
Guardianship: What is source of funds? _____
Is bond required on demand of anyone (other than Court)? Yes No

Who: _____

Has applicant ever been denied bond? Yes No

ATTORNEY: _____

FIDUCIARY: _____

ADDRESS: _____

ADDRESS: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

**SSN: _____

Relationship to deceased/ward: _____

ASSETS of ESTATE, GUARDIANSHIP, TRUST:

Personal Property \$ _____
Real Estate \$ _____
Other: (describe) _____ \$ _____
Total \$ _____
AMOUNT OF BOND REQUESTED \$ _____

SURETY COMPANY: _____	APPROVED: <input type="checkbox"/>	DECLINED: <input type="checkbox"/>
PRE-AUTHORIZED BOND AMOUNT: _____		
BY: _____	Date: _____	
Cathy Victor, Attorney-in-Fact Christina Carmell, Attorney-in-Fact	Nicole Romanelli, Attorney-in-Fact	BOND No.: _____

**The applicant agrees that the surety company may use the fiduciary's social security number to obtain and review a credit report.