

**EIGHTH JUDICIAL DISTRICT COURT
CLARK COUNTY, NEVADA
FAMILY COURT COVER SHEET**

CASE NO. _____ (To be assigned by the Clerk's Office)

Do you or any other party in this case (including any minor child) have any other current case(s) or past case(s) in the Family Court or Juvenile Court in Clark County?
 YES NO
If yes, complete the other side of this form

PARTY INFORMATION (Please Print)

Plaintiff/Petitioner		Defendant/Respondent/Co-Petitioner/Ward/Decedent	
Last Name:		Last Name:	
First Name:	Middle Name:	First Name:	Middle Name:
Home Address:		Home Address:	
City, State, Zip:		City, State, Zip:	
Mailing Address:		Mailing Address:	
City, State, Zip:		City, State, Zip:	
Phone #:	Date of Birth:	Phone #:	Date of Birth:
Attorney Information		Attorney Information	
Name:	Bar No.:	Name:	Bar No.:
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Phone #:		Phone #:	

(Check one box only for the type of case being filed with this cover sheet)

DOMESTIC	MISC. DOMESTIC RELATIONS PETITIONS	GUARDIANSHIP	PROBATE
Marriage Dissolution <input type="checkbox"/> Annulment <input type="checkbox"/> Divorce –No minor child(ren) <input type="checkbox"/> Divorce –With minor child(ren) <input type="checkbox"/> Foreign Decree <input type="checkbox"/> Joint Petition –No minor child(ren) <input type="checkbox"/> Joint Petition – With minor child(ren) <input type="checkbox"/> Separate Maintenance	<input type="checkbox"/> Adoption –Minor <input type="checkbox"/> Adoption –Adult <input type="checkbox"/> Mental Health <input type="checkbox"/> Name Change <input type="checkbox"/> Paternity <input type="checkbox"/> Permission to Marry <input type="checkbox"/> Temporary Protective Order (TPO) <input type="checkbox"/> Termination of Parental Rights <input type="checkbox"/> Child Support/Custody <input type="checkbox"/> Other (identify) _____	Guardianship of an Adult <input type="checkbox"/> Person <input type="checkbox"/> Estate <input type="checkbox"/> Person and Estate Guardianship of a Minor <input type="checkbox"/> Person <input type="checkbox"/> Estate <input type="checkbox"/> Person and Estate <input type="checkbox"/> Guardianship Trust	<input type="checkbox"/> Summary Administration <input type="checkbox"/> General Administration <input type="checkbox"/> Special Administration <input type="checkbox"/> Set Aside Estates <input type="checkbox"/> Trust/Conservatorships <input type="checkbox"/> Individual Trustee <input type="checkbox"/> Corporate Trustee <input type="checkbox"/> Other Probate
MISC. JUVENILE PETITIONS	DA CHILD SUPPORT PETITIONS		
<input type="checkbox"/> Emancipation	<input type="checkbox"/> DA – UIFSA	<input type="checkbox"/> DA - Child Support In State	

List children involved in this case (If more than 3 children, please enter the information on the reverse side)

Last Name	First Name	Middle Name	Date of Birth	Relationship
1.				
2.				
3.				

Printed Name of Preparer _____

Signature of Preparer _____

Date _____

Supply the following information about any other proceeding (check all that apply):

- Divorce
 Temporary Protective Orders (TPO)
 Custody/Child Support
 UIFSA/URESA
 Paternity
 Juvenile Court
 Other

Please Print

List full name of all adult parties involved			Case number of other proceeding(s)	Approximate date of last order in other proceeding(s)
Last Name	First Name	Middle Name		
1.				
2.				
3.				
4.				

If children were involved (other than those listed on front page), please provide:

Last Name	First Name	Middle Name	Date of Birth	Relationship
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Children involved in this case (continuation from front page)

Last Name	First Name	Middle Name	Date of Birth	Relationship
4.				
5.				
6.				
7.				
8.				

THIS INFORMATION IS REQUIRED BY
NRS 3.025, NRS 3.223, NRS 3.227, NRS 3.275,
NRS 125.130, NRS 125.230,
And will be kept in a confidential manner by the Clerk's Office.

1 PET

2 _____
Name

3 _____
Address

4 _____
City, State, Zip Code

5 _____
Telephone number/E-mail Address

6 IN PROPER PERSON

7 DISTRICT COURT
8 CLARK COUNTY, NEVADA

9 In the Matter of the Estate of:)
10) Case No. P _____
11) Dept. No. PC-1
12)
_____ Deceased.)

13 PETITION FOR SPECIAL LETTERS OF ADMINISTRATION

14 Petitioner, _____,
15 appearing in Proper Person, respectfully represents as follows:

16 1. That the decedent, _____,
17 died on or about the ____ day of _____, _____. A
18 certified copy of Decedent's death certificate is attached as
19 Exhibit "A" and by reference made a part hereof.

20 2. The decedent was at the time of his/her death, a
21 resident of the County of Clark, State of Nevada, and that
22 his/her estate consists of personal property and that the exact
23 value and character of said property has not been determined.

24 3. There is no person authorized to care for the property
25 belonging to the estate and there is danger of the same being
26 neglected and greatly damaged thereby and someone should be
27
28

1 authorized to take charge of and care of the property of the
2 estate. Special Administration is needed for the following
3 reason(s): _____
4 _____
5 _____
6 _____
7 _____

8 4. Petitioner is willing to act as Special Administrator
9 of the estate to ascertain the assets and protect the same and
10 for the reasons stated in Number 3 above.
11

12 5. Petitioner's relationship to decedent is _____
13 and Petitioner has never been convicted of a felony.

14 6. The following are the relatives and heirs of the decedent
15 within the second degree of consanguinity are:
16

17 (Below Must Include: Legally Married Spouse and All Children, Even If Estranged or out
18 of State And You as Petitioner Stating All Relationships, adult or minor and Addresses
19 (if unknown put last address or unknown)

Name ↓	Relationship/Age ↓	Address ↓
1.		
2.		
3.		
4.		
5.		
6.		

27 WHEREFORE, Petitioner prays that he/she be appointed
28 Special Administrator of the Estate of _____,

1 deceased, with all liquid assets placed in a blocked account,
2 with authority to take possession of said property, and
3 specifically to: _____
4 _____
5 _____
6 _____.

7 DATED this _____ day of _____, 20____.

10 _____
Signature of Petitioner

12 VERIFICATION

13 STATE OF NEVADA
14 COUNTY OF CLARK

16 Under penalties of perjury, the undersigned states as
17 follows: That I am the Petitioner in the foregoing action; that
18 I have read the above and foregoing Petition For Special Letters
19 of Administration, and that the same is true of my own
20 knowledge, except for matters stated therein on information and
21 belief, and as for those matters, I believe it to be true.

22 _____
Signature of Petitioner

1 ORDR

2 _____
Name

3 _____
Address

4 _____
City, State, Zip Code

5 _____
Telephone number/E-mail Address

6 IN PROPER PERSON

7 DISTRICT COURT
8 CLARK COUNTY, NEVADA

9 In the Matter of the Estate of:)
10) Case No. P _____
11) Dept. No. PC-1
12)
_____ Deceased.)

13 ORDER APPOINTING SPECIAL ADMINISTRATOR

14 Upon submission of a verified Ex Parte Petition for
15 Appointment of Special Administrator and for Issuance of Special
16 Letters of Administration, representing as follows:
17

18 1. That Decedent, _____,
19 died intestate on the ____ day of _____, 20____, in the
20 County of Clark, State of Nevada.

21 2. That Decedent was a resident of Clark County, Nevada,
22 at the time of their death.

23
24 NOW, THEREFORE, IT IS HEREBY ORDERED that _____
25 _____ is appointed as Special Administrator
26 and that Special Letters of Administration be issued, without
27 bond, to the Petitioner, _____,
28

1 upon taking the oath of office, for the purpose of administering
2 the estate in accordance with Nevada Revised Statutes Chapter
3 140.040 (see Exhibit A attached)
4 _____
5 _____

6 IT IS FURTHER ORDERED: (You must one box)

7 All moneys received by this estate will be placed in a
8 blocked account until further order by the court and proof
9 of the blocked account shall be filed with the court within
10 thirty (30) days from the date of entry of this court
11 order.
12

13 All moneys received by this estate will be placed in the
14 attorney's trust account until further order by the court.
15

16 IT IS FURTHER ORDERED that the settlement of the decedent's
17 lawsuit is subject to this court's approval.

18 DATED this _____ day of _____, 20____.

21 _____
22 District Court Judge

23 Submitted by:
24 _____
25 Name:

1 EXHIBIT A

2 **NRS 140.040 Powers, duties and immunity from liability for certain claims.**

3 1. A special administrator shall:

4 (a) Collect and preserve for the executor or administrator when appointed all
5 the goods, chattels and receivables of the decedent, and all incomes, rents, issues,
6 profits, claims and demands of the estate.

7 (b) Take charge and management of the real property and enter upon and
8 preserve it from damage, waste and injury.

9 2. A special administrator may:

10 (a) For all necessary purposes, commence, maintain or defend actions and other
11 legal proceedings as a personal representative.

12 (b) Without prior order of the court, sell any perishable property of the estate,
13 as provided in NRS 148.170.

14 (c) Exercise such other powers as have been conferred by the order of
15 appointment.

16 (d) Obtain leave of the court to borrow money or to lease or mortgage real
17 property in the same manner as an executor or administrator.

18 3. A special administrator is not liable:

19 (a) To any creditor on any claim against the estate; or

20 (b) For any claim against the decedent except a claim involving wrongful
21 death, personal injury or property damage if the estate contains no assets other than
22 a policy of liability insurance.

23 [Part 86:107:1941; 1931 NCL § 9882.86]—(NRS A 1971, 647; 1983, 668;
24 1999, 2276)

LETT

DISTRICT COURT
CLARK COUNTY, NEVADA

In the Matter of the Estate of:

) Case No. P _____

) LETTERS OF SPECIAL ADMINISTRATION

) _____
Deceased.

On the _____ day of _____, 20____, the Court entered an Order appointing

_____ as Special Administrator of the Decedent's Estate. The Order

includes:

- A directive for no bond;
- A directive for the establishment of blocked accounts;
- A directive for the posting of bond in the sum of \$ _____; or
- A directive for both the establishment of blocked accounts for sums in excess of \$ _____ and the posting of bond in the sum of \$ _____.

The Special Administrator, having duly qualified, may act and has the authority and duties of Special Administrator.

In testimony of which, I have this date signed these Letters and affixed the seal of the Court.

CLERK OF COURT

By: _____
Deputy Clerk Date

OATH

I, _____, whose mailing address is _____, solemnly affirm that I will faithfully perform according to law the duties of Special Administrator and that all matters stated in any petition or paper filed with the Court by me are true of my own knowledge or, if any matters are stated on information and belief, I believe them to be true.

ADMINISTRATOR

SUBSCRIBED AND AFFIRMED before me this
_____ day of _____, 20____.

CLERK OF COURT

By: _____
Deputy Clerk

(OR) _____
NOTARY PUBLIC

County of _____ State of _____