5 East Pine Street P.O. Box 743 Georgetown, DE 19947



Phone: (302) 855-7875 Fax: (302) 853-5871 sussexcountyde.gov

FORM 651 Division of Revenue Register of Wills

## IN THE OFFICE OF THE REGISTER OF WILLS IN AND FOR SUSSEX COUNTY, STATE OF DELAWARE

## OATH OR AFFIRMATION OF PERSONAL REPRESENTATIVE IN LIEU OF FILING INVENTORY AND RENDERING FINAL ACCOUNT

Date of Death: Date Letters Granted:

STATE OF

COUNTY OF

makes solemn oath (or affirmation) that has diligently inquired and can obtain no knowledge of any real estate or goods and chattels belonging to:

SS.

, deceased,

late of

or to the said deceased jointly with another individual; or of any debts or credits due or belonging to the said deceased, or to the said deceased jointly with another individual.

## PURPOSE FOR WHICH LETTERS WERE GRANTED (State Fully)

(Personal Representative)	(Personal Representative)	
(Address)	(Address)	
SWORN TO AND SUBSCRIBED (OR AFFIRMED) befo	ore me this day of	f , 20
N	otary Public, or other qua	lified person (state title)
APPROVED IN OFFICE OF REGISTER OF WILLS	APPROVED BY COURT OF CHANCERY THIS	
COUNTY THIS	DAY OF	, 20
DAY OF, 20		
(Register of Wills)		(Magistrate)

## INSTRUCTIONS FOR OATH OR AFFIRMATION OF PERSONAL REPRESENTATIVE IN LIEU OF FILING INVENTORY AND RENDERING FINAL ACCOUNT FORM 651

To be used when there were no assets belonging to the decedent, and none were located (or came in) thereafter.

EXAMPLE: Minor killed in auto accident; Litigation; **no** recovery.