

# Part 2

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Case # \_\_\_\_\_

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## Register of Wills

### WAIVER OF NOTICE AND CONSENT BY PARENT, GUARDIAN, OR TRUSTEE OF HEIR SUBJECT TO LEGAL INCAPACITY

ESTATE OF \_\_\_\_\_

I, \_\_\_\_\_

whose mailing address is \_\_\_\_\_

\_\_\_\_\_

hereby certify as follows:

- (1) I am the  parent,  guardian or  trustee of \_\_\_\_\_, a legally incapacitated person with the right to share in the distribution of the property of the above-referenced estate.
- (2) I, pursuant to 12 Del. C. §2302 (c), hereby give up any right that I may have or that such legally incapacitated heir may have to receive further notice of the filing of such accounting and all future accountings.
- (3) I consent, on behalf of the legally incapacitated heir, that such account(s) may be approved by the Court of Chancery without further notice to me or to such legally incapacitated heir.
- (4) I understand that this waiver is final and in force when it is filed with the Register of Wills and may **NOT** afterwards be taken back.
- (5) Original, signed form must be provided to the Personal Representative or Attorney.

\_\_\_\_\_  
Parent, Guardian, or Trustee

Dated: \_\_\_\_\_