PA1P — Probate application

This form is for an application where the person who has died left a will

Checklist – before you send your application form to HMCTS Probate you will need to enclose the following. This checklist must be completed. If you do not enclose all of the required documents it will delay your application. Please keep copies of all documents that you send.

- ☐ PA1P - Probate Application (this form) - where a person who has died has left a will.
- ☐ Inheritance Tax Summary Form: Please submit the appropriate form (IHT205 or IHT207, and IHT217 if applicable), signed by all applicants (see additional notes in Section 7).
- ☐ The last original will and any codicils made since that will.
- ☐ A copy of any foreign wills or any wills dealing with assets held outside England and Wales (and if not in English, an English translation).
- ☐ An official copy (**not** a photocopy) of the death certificate, or a coroner's interim certificate of the person who has died.
- ☐ Any other documents requested on this form. Please list them:

As well as the application fee, there is a fee for each official copy of the Grant of Representation that we provide.

How many official copies of the Grant of Representation do you require for use **in** the United Kingdom? ☐

How many official copies of the Grant of Representation do you require for use **outside** of the United Kingdom? ☐

Application fee	£
Fees for copies	£
Total fees	£

- ☐ Debit or Credit card. (This payment must be made before you send your application and the payment reference entered in the box below.)

Payment reference

- ☐ A cheque/postal order payable to '**HMCTS**' in respect of HMCTS's fees. Please write the name of the person who has died on the back of the cheque.

If you need help filling out this form please call the

Probate Helpline
0300 123 1072

We cannot provide legal advice

Did you know you can apply for Probate online?

Go to www.gov.uk/wills-probate-inheritance/appyling-for-a-grant-of-representation

Checklist note – Do not attach anything to or remove anything from the original will/codicils. Also, make sure that you keep a copy for yourself.

Details of how to pay by debit or credit card can be found at www.gov.uk/wills-probate-inheritance/applying-for-a-grant-of-representation

Please send your form and required documents with payment to HMCTS Probate, PO Box 12625, Harlow, CM20 9QE.

© Crown copyright 2019

SECTION A – PERSONAL INFORMATION

Please complete in BLOCK capitals placing a tick in boxes where applicable.

1. **About the applicant(s)** – All applicants must be over 18 years and a maximum of 4 may apply

1.1 Title and full name including middle names of **first applicant**

Title

First name(s)

Middle name(s)

Last name

1.2 Is your name different in the will and codicil?

☐ Yes, give the name as it appears in the will or codicil in the box below

☐ No

Note 1.1 –
all correspondence, including the Grant of Representation, will be sent to the first applicant named in this section.

Only list applicants who wish to be named on the grant in this section and they will be required to sign this document. Please note that the names you provide here must match the names provided on your formal ID. E.g. passport or Driving licence.

When there are no executors applying and there are persons aged under 18 benefiting from the estate then two applicants (or at least two) will be needed in Section A. You may wish to contact HMCTS Probate to seek information in regard to who is eligible to apply.

1.3 Your address

Building and street

Second line of address

Town or city

County (optional)

Postcode

1.4 Your home telephone number

1.5 Your mobile/work telephone number

1.6 Your email address

Note 1.6 – we will contact you with any queries via this email address.
We aim to contact you within 10 working days of receipt of your application.

1.7 Title and full name including middle names of **second applicant**

Title

First name(s)

Middle name(s)

Last name

1.8 Is their name different in the will and codicil?

☐ Yes, give the name as it appears in the will or codicil in the box below

☐ No

1.9 Their address

Building and street

Second line of address

Town or city

County (optional)

Postcode

1.10 Their email address

1.11 Title and full name including middle names of **third applicant**

Title

First name(s)

Middle name(s)

Last name

1.12 Is their name different in the will and codicil?

☐ Yes, give the name as it appears in the will or codicil in the box below

☐ No

1.13 Their address

Building and street

Second line of address

Town or city

County (optional)

Postcode

1.14 Their email address

1.15 Title and full name including middle names of **fourth applicant**

Title

First name(s)

Middle name(s)

Last name

1.16 Is their name different in the will and codicil?

☐ Yes, give the name as it appears in the will or codicil in the box below

☐ No

1.17 Their address

Building and street

Second line of address

Town or city

County (optional)

Postcode

1.18 Their email address

SECTION B

The information you provide in this section of the application form will be the basis of your statement of truth, and it will be stored as a public record.

If you need help filling out this form please call the

Probate Helpline
0300 123 1072

We cannot provide legal advice

2. About the person who has died

2.1 Forename(s) (including all middle names) as they appear on the Death Certificate

2.2 Surname as it appears on the Death Certificate

2.3 Permanent address

Building and street

Second line of address

Town or city

County (optional)

Postcode

2.4 Date they were born

2.5 Date they died

2.6 Was the person who has died known by any other name in which they held assets?

☐ Yes, **go to question 2.7**

☐ No, **go to question 2.8**

2.7 Please give the details of any other names by which the person who has died held assets.

Full name

Note 2.7 – These names must be ones that will appear on the grant because an asset is in that name. We do not need to know the asset.

2.8 Did the person who died live permanently in England and Wales at the date of death, or intend to return to England and Wales to live permanently? (For legal purposes this generally means they were domiciled in England and Wales. You may wish to seek legal advice about this.)

- ☐ Yes
- ☐ No

Note 2.8 – Living permanently means they had either their permanent or principal home in England and Wales at the date of death or they intended to return to England and Wales to live permanently.

2.9 What was the marital status of the person who has died when they died?

- ☐ Never married
- ☐ Widowed, their lawful spouse or civil partner having died before them
- ☐ Married/in a civil partnership - give date

- ☐ Divorced/civil partnership is dissolved - give date

- ☐ Judicially separated - give date

Note 2.9 – a civil partnership is a same-sex relationship that has been registered in accordance with the Civil Partnership Act 2004. A marriage is a legal ceremony conducted in UK under the Marriage Acts 1949, 1994 and The Marriage (Same Sex Marriage) Act 2013 or under legislation in any other country by the law applicable there. Date of divorce - this date is on their Decree Absolute, Decree of Dissolution of Partnership or Decree of Judicial Separation. You can get an official copy of these documents from the court that issued them, or from The Divorce Absolute Search Section, Central Family Court, 42–49 High Holborn, London WC1V 6NP.

2.10 What is the name of the court where the Decree Absolute, Decree of Dissolution of Partnership or Decree of Judicial Separation was issued?

2.11 Did the person who has died own any foreign assets?

- ☐ Yes, the total value of their foreign assets (not including houses or land)

  £

- ☐ No

2.12 Was there any land vested in the person who has died which was settled previously to their death and which remained settled land not withstanding their death?

- ☐ Yes
- ☐ No

Only answer this question if no executor to the will is applying

2.13 Was the person who has died or any of their relatives legally adopted in or out of the family?

- ☐ Yes, **see note 2.13**
- ☐ No, **go to question 3**

2.14 Please name the legally adopted relatives and give their relationship to the person who has died. Please state whether they were adopted into the family of the person who has died, or 'adopted out' (become part of someone else's family).

Name	Relationship	Adopted **in** or **out**

Note 2.12 – It is rare for estates to be subject to the provisions of the Settled Land Act 1925 but if you know this applies or have any queries please seek legal advice.

Note 2.13 – If you answered Yes to this question we may require additional information to be submitted once we have received your application.

3. **The will and any codicils** – This section is about the will. You must submit the most recent original will and codicils made since the last will, if there are any.

3.1 What is the date of the will you are submitting to the court?

3.2 Did the person who has died also leave any codicils, made since that will?

☐ Yes, **please provide the original document(s) with your application and list below the dates of the codicils you are submitting to the court.**

☐ No

3.3 Did the person who has died have any wills that were made outside of England and Wales?

☐ Yes

☐ No

3.4 Did the person who has died marry or enter into a Civil Partnership after the date of the will or any codicils?

☐ Yes, please give the date of marriage or civil partnership

☐ No

Only answer this question if no executor to the will is applying

3.5 Is there anyone under 18 years old who receives a gift in the will or a codicil?

☐ Yes, **Please note two applicants will need to apply in Section A. Contact HMCTS Probate to see who is entitled to make the application.**

☐ No

Note 3 – a will does not have to be a formal document. Please make sure you send the original will with your application. If you do not then this will delay your application.

If you have been unable to locate the original will or any codicil and only have a copy and have made all reasonable attempts to locate the original. Please visit GOV.UK (gov.uk/wills-probate-inheritance/if-the-person-left-a-will) to print off the PA13 lost will questionnaire or call 0117 9302430 and quote 'Lost will' and we will supply additional information to help you proceed.

Note 3.2 – a codicil is a document that amends a will.

3.6 Name any executors who are **not** making this application, and explain why.

Reasons for executors not applying:

A – They died before the person who has died.

B – They died after the person who has died (Please include the date they died by their name).

C – Power reserved: they have chosen not to apply, but reserve the right to do so later.

D – Renunciation: they have chosen not to apply, and give up all rights to apply. (Before you send off your application please **read NOTE REASON D**)

E – Power of attorney: they have appointed or wish to appoint another person to act as their attorney to take a Grant of Representation on their behalf (You will also need to complete Section 5 of this application). (Before you send off your application please **read NOTE REASON E**)

F – They lack capacity to act as executor.

Full name(s) of executor(s) **not** applying	A, B, C, D, E or F

Note 3.6 – Executors are the first person who can apply for a grant. We need to know why any executors aren't included in this application. This includes any executors who have pre-deceased. **If you do not provide all of the information this will delay your application.**

Reason C

If any executors are having power reserved, you **must** notify them of the application in writing. The Grant of Representation will only be issued to those people named as applicants in Section A.

Reason D

If you state that an executor has given up their right to apply. We will need to send another form to you to give to the executor, for them to sign. Please visit GOV.UK (gov.uk/wills-probate-inheritance/if-youre-an-executor) to print off the PA15 renunciation form or call 0117 9302430 and quote 'Renunciation' and we will send the renunciation form.

You will need to send the renunciation form to us with this application.

Reason E

If you state that an executor wishes to appoint an attorney or they already have an attorney. We will need to send another form to you to give to the executor for them to sign, or you will need to provide one of the forms mentioned in Section 5.

Please visit GOV.UK (gov.uk/wills-probate-inheritance/if-youre-an-executor) to print off the PA11 attorney form or call 0117 9302430 and quote 'Attorney' and we will send the attorney form.

You will need to send the attorney form to us with this application. The attorney of one executor and an executor acting in their own right may not jointly apply for a Grant of Representation.

Reason F

If you state that an executor lacks capacity and are incapable of managing their property and financial affairs, when we receive this application we may send a medical certificate for the executors' doctor to sign. If you do not already have medical evidence from a qualified practitioner or are using a registered LPA a short form of medical evidence will be required.

Please visit GOV.UK (gov.uk/wills-probate-inheritance/if-youre-an-executor) to print off the PA14 medical certificate or call 0117 9302430 and quote 'Medical evidence' and we will send out the form.

You will need to send the medical certificate to us with this application.

The attorney of one executor and an executor acting in their own right may not jointly apply for a Grant of Representation.

3.7 ☐ The undersigned declare that written notice has been given to all executors who have power reserved to them and are not making this application.

If you fail to give written notice, it is likely to delay your application.

3.8 Did you separate the will for photocopying purposes?

☐ Yes - please explain the details in the box below including who separated it, when they did and why they did it.

☐ No

3.9 Can you confirm the will consisted of the pages now being submitted and no other pages or documents of a testamentary nature or other nature were attached.

☐ Yes

☐ No

4. Relatives of the person who has died

4.1 Did the person who has died leave a surviving spouse or civil partner?

☐ Yes

☐ No

Note 4.1 – 'survive' means that they were alive when the deceased person died.

4.2 How many of the following blood and adoptive relatives did the person who has died have?

Note 4.2 – Please state the **number** of relatives the person who has died had in the relevant sections. If none then put nil or strike through.

		Under 18 years	Over 18 years
a	How many sons or daughters of the person who died survived them?		
b	How many sons or daughters of the person who has died who did not survive them?		
c	How many children of people at 'b' who survived them?		

4.3 Please state the relationship of each of the persons applying for the grant to the person who has died. (If you are applying as an attorney for someone then please state attorney)

Relationship description

First applicant

Second applicant

Third applicant

Fourth applicant

5. Applying as an attorney

5.1 Are you applying as an attorney on behalf of one or more people who are entitled to apply for a Grant of Representation?

☐ Yes, **go to question 5.2**

☐ No, **go to section 6**

5.2 Please give the full names of the person or people on whose behalf you are applying.

5.3 Please give their address

Building and street

Second line of address

Town or city

County (optional)

Postcode

5.4 Is a person on whose behalf you are applying unable to make a decision for themselves due to an impairment of or a disturbance in the functioning of their mind or brain?

☐ Yes, further confirmation of this will be requested by HMCTS Probate.

☐ No

5.5 Has anyone been appointed by the Court of Protection to act on behalf of a person on whose behalf you are applying including the right for a grant of representation?

☐ Yes, **please provide an official copy of the court order with your application**

☐ No

Note 5 – if you are applying on behalf of more than one person, please provide the information requested in this section for the other people you represent on a separate sheet of paper. We will need to send another form to you to give to the executor for them to sign, or you will need to provide one of the forms mentioned in this section.

Please visit GOV.UK (gov.uk/wills-probate-inheritance/if-youre-an-executor) to print off the PA11 attorney form or call 0117 9302430 and quote 'Attorney' and we will send the attorney form.

You will need to send the signed attorney form to us with this application. The attorney of one executor and an executor acting in their own right may not jointly apply for a Grant of Representation.

Where there are persons aged under 18 benefiting from the estate then two applicants (or at least two) will be needed in Section A. You may wish to contact HMCTS Probate to seek information in regard to who is eligible to apply.

Note 5.4 – this applies if they lack capacity under the Mental Capacity Act 2005 and are incapable of managing their property and financial affairs. You may wish to seek legal advice about this.

If you do not already have medical evidence from a qualified practitioner or are using a registered LPA a short form of medical evidence will be required.

Please visit GOV.UK (gov.uk/wills-probate-inheritance/if-youre-an-executor) to print off the PA14 medical certificateor call 0117 9302430 and quote 'medical evidence' and we will send the form.

5.6 Has a person on whose behalf you are applying appointed an attorney under an Enduring Power of Attorney (EPA) or a Property and Financial Affairs Lasting Power of Attorney (LPA)?

- ☐ Yes, **please provide the original EPA/LPA (or a solicitor's certified copy of it certified on every page.) with your application**
- ☐ No, **go to Section 6**

5.7 Has the Enduring Power of Attorney (EPA) been registered with the Office of the Public Guardian?

- ☐ Yes
- ☐ No

6. Foreign domicile

Note – if you answered Yes, to question 2.8 you don't need to complete this section – please go to Section 7.

6.1 What was the country where the person who died either lived permanently at the date of death or intended to return to live permanently?

6.2 What does the estate in England and Wales of the person has died consist of?

Assets	Values

6.3 Has an entrusting document been issued by the court where the person who has died was domiciled?

☐ Yes, **please provide the official document with your application; if it is not in English, please also provide an official translation. Go to Section 7.**

☐ No

6.4 Has a succession certificate, inheritance certificate or equivalent document been issued by a court or Notary in the country of domicile of the person who has died?

☐ Yes, **please provide the offical document with your application; if it is not in English, please also provide an official translation.**

☐ No

Note 6.3 and 6.4 – these documents may help to support your application. If you do not have any of these documents, you may wish to seek legal advice.

7. Inheritance tax

7.1 Did you complete an Inheritance Tax Estate report online?

☐ Yes, do not submit an Inheritance Tax form with this application

Please provide the following details, **then go to Legal Statement**:

IHT Identifier

Gross Estate Figure £

Net Estate Figure £

☐ No, **go to question 7.2**

7.2 Which of the following inheritance tax forms have you completed?

☐ Form **IHT205**, **complete 7.3 then go to Legal Statement**

☐ Form **IHT207**, **complete 7.4 then go to Legal Statement**

☐ Forms **IHT400** and **IHT421**, **complete 7.5 then go to Legal Statement**

7.3 Provide the following figures from form **IHT205**.

Figure from box D £

Figure from box F £

(This figure will determine the probate application fee)

7.4 Provide the following figures from form **IHT207**.

Figure from box A £

Figure from box H £

(This figure will determine the probate application fee)

7.5 Provide the following figures from form **IHT421**.

Figure from box 3 £
(Gross value of assets)

Figure from box 5 £
(Net value)

(This figure will determine the probate application fee)

Note 7 – if you completed an Inheritance Tax Summary online, and fully complete question 7.1 of this form, you do not need to send an Inheritance Tax Estate report form with your application.

For guidance on probate fees please visit www.gov.uk/wills-probate-inheritance/

Note 7.2 – if you did not complete an Inheritance Tax Estate report online, you **must** complete IHT205, or IHT207, or both IHT400 and IHT421.

Note 7.3 – if the person who has died, died before 1 September 2006, it may affect which tax form you need to complete, so please ring the **Probate Helpline** on **0300 123 1072**.

Note 7.5 – do **not** send form IHT400 or form IHT421 to us. Please send them to HM Revenue and Customs, Inheritance Tax, BX9 1HT, at the same time you send PA1P and other papers to HMCTS Probate. HMRC will stamp your IHT421 and send it to HMCTS Probate.

LEGAL STATEMENT

The undersigned confirms:

- That the last will and any codicils referred to in this application is the last will and testament of the person who has died
- to collect the whole estate
- to keep full details (an inventory) of the estate
- to keep a full account of how the estate has been distributed

If HMCTS Probate (court) asks the undersigned they will:

- Provide the full details of the estate and how it has been distributed
- Return the grant of representation to the court

and understand that:

- The application will be rejected if the information is not provided (if asked)
- Criminal proceedings for fraud may be brought against the undersigned if it is found that the evidence provided is deliberately untruthful or dishonest

The undersigned confirm to administer the estate of the person who has died in accordance to law, and that the application is truthful.

ALL PERSONS APPLYING FOR THE GRANT (those listed in Section A) **MUST SIGN BELOW.**

Name of **first applicant**

Signature

Date signed

Name of **second applicant**

Signature

Date signed

Name of **third applicant**

Signature

Date signed

Name of **fourth applicant**

Signature

Date signed

Please send the original form signed by all applicants and required documents with payment to:

HMCTS Probate, PO Box 12625, Harlow, CM20 9QE

Phone 0300 303 0648
Email contactprobate@justice.gov.uk

FOR OFFICE USE ONLY

How are the applicants entitled to apply.

In what capacity are the persons applying entitled to apply?

- ☐ The executor/s named in the will/codicil of the person who has died
- ☐ The Attorney/s acting on behalf of the executor/s named in the will/ codicil of the person who has died
- ☐ Beneficiary/s named in the will/codicil of the person who has died
- ☐ The Attorney/s acting on behalf of the beneficiary/s named in the will/ codicil of the person who has died
- ☐ Other (Please state in the box below the reason they are applying)

Equality and diversity questions (optional)

- **These are optional questions about you**
- **Your answers will not affect your case**
- **We will not share your answers with anyone involved in your case**

Your answers will help us check we are treating people fairly and equally.

These questions should be answered by one executor.

If you are a legal professional completing the form on behalf of an executor don't answer the questions.

How to complete these questions

1. Answer the questions on the next four pages. You can always choose 'prefer not to say' or leave them blank.
2. Send one copy of the completed questionnaire with your application to:

   HMCTS Probate

   PO BOX 12625

   Harlow

   CM20 9QE

Equality and diversity questions

1. What is your main language?

- ☐ English or Welsh, **go to question 3**
- ☐ Other, give details (including British sign language)
- ☐ Prefer not to say, **go to question 3**

2. If you have answered 'Other' in question 1, how well can you speak English?

- ☐ Very well
- ☐ Well
- ☐ Not well
- ☐ Not at all
- ☐ Prefer not to say

3. What is your religion?

- ☐ No religion
- ☐ Christian (all denominations)
- ☐ Buddhist
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ Any other religion, please describe
- ☐ Prefer not to say

4. What is your date of birth?

Day	Month	Year

- ☐ Prefer not to say

5. What is your ethnic group?

☐ Prefer not to say

White

☐ English, Welsh, Scottish, Northern Irish or British

☐ Irish

☐ Gypsy or Irish Traveller

☐ Any other White background, please describe

Mixed/Multiple ethnic groups

☐ White and Black Caribbean

☐ White and Black African

☐ White and Asian

☐ Any other Mixed/Multiple ethnic background, please describe

Asian/Asian British

☐ Indian

☐ Pakistani

☐ Bangladeshi

☐ Chinese

☐ Any other Asian background, please describe

Black/African/Caribbean/Black British

☐ African

☐ Caribbean

☐ Any other Black/African/Caribbean background, please describe

Other ethnic group

☐ Arab

☐ Any other ethnic group, please describe

6. Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- ☐ Yes, **go to question 7**
- ☐ No, **go to question 9**
- ☐ Prefer not to say, **go to question 9**

7. If Yes, do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- ☐ Yes, a little, **go to question 8**
- ☐ Yes, a lot, **go to question 8**
- ☐ Not at all, **go to question 9**
- ☐ Prefer not to say, **go to question 9**

8. Do any of these conditions or illnesses affect you in any of the following areas?

Tick all options that apply

- ☐ **Vision** – for example blindness or partial sight
- ☐ **Hearing** – for example deafness or partial hearing
- ☐ **Mobility** – for example walking short distances or climbing stairs
- ☐ **Dexterity** – for example lifting and carrying objects, using a keyboard
- ☐ **Learning or understanding or concentrating**
- ☐ **Memory**
- ☐ **Mental health**
- ☐ **Stamina or breathing or fatigue**
- ☐ **Socially or behaviourally** – for example associated with autism, attention deficit disorder or Asperger's syndrome
- ☐ **Other**, please specify

  [ ]

- ☐ **None of the above**

9. Are you currently pregnant or have you been pregnant in the last year?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

10. Which of the following options best describes how you think of yourself?

- ☐ Heterosexual or Straight
- ☐ Gay or Lesbian
- ☐ Bisexual
- ☐ Other, please describe

  _____

- ☐ Prefer not to say

11. What is your sex?

- ☐ Male
- ☐ Female
- ☐ Prefer not to say

12. Is your gender the same as the sex you were registered at birth?

- ☐ Yes
- ☐ No, my gender is

  _____

- ☐ Prefer not to say

13. Are you married or in a legally registered civil partnership?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

Thank you for answering these questions

Send this questionnaire back with your completed application

Privacy notice

By submitting your answers, you agree that we can collect your information. We'll use it to help us meet our commitment to equality under the Equality Act 2010. You can withdraw your consent or change your answers at any time, see information below in our privacy notice.

For details of the standards we follow when processing your data, please visit the following address https://equality-and-diversity.platform.hmcts.net/privacy-policy

To receive a paper copy of this notice, please call 0300 303 0648

Alternative formats

If you need this form in an alternative format, for example in large print, call 0300 303 0648