# PA1A — Probate application

This form is for an application where the person who has died **did not leave a will** that deals with assets in England and Wales

**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.

	PA1A - Probate Application (this form)
[	Inheritance Tax Summary: You must estimate the estates value before completing this form. Your application may be delayed, if you do not do this
[	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 ( <b>not</b> 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

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	£

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 303 0648

We cannot provide legal advice

# Did you know you can apply online?

www.gov.uk/apply-for-probate If you do not feel confident using the internet, or do not have access to a computer or smartphone, call the Digital Support helpline on 03300 160051 who will help you.

#### Need legal advice?

Contact <u>www.citizensadvice.</u> <u>org.uk</u> or get help from a legal professional.

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

# **SECTION A – PERSONAL INFORMATION**

- 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	e(s)							
Middle na	ime(s	)			 	 	 	
Last name	ē							

#### 1.2 Your address

Building and street

Second line of address

Town or city

County (optional)

Postcode



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

#### 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.

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.

		elephone							
Your emai	address								Note 1.5 we will contact
									Note 1.5 – we will contact you with any queries via this email address.
									We aim to contact you with 10 working days of receipt of
Title and f	ull name i	ncluding	middle na	imes of	secon	l appl	icant		your application.
Title									
First name	(s)								
	me(s)	1						 	
Middle na									
Middle na									
Middle na									
Middle na									

# **1.7** Their address

Building and street

Second line of address

Town or city

# County (optional)

#### Postcode



# **1.8** Their email address

# **1.9** Title and full name including middle names of **third applicant**

#### Title



## First name(s)

#### Middle name(s)

#### Last name

# 1.10 Their address

Building and street

Second line of address

Town or city

# County (optional)

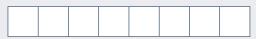
#### Postcode



#### **1.11** Their email address

# 1.12 Title and full name including middle names of fourth applicant

#### Title



# First name(s)

# Middle name(s)

#### Last name

# 1.13 Their address

Building and street

Second line of address

Town or city

# County (optional)

# Postcode



# **1.14** 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.

# 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

If you need help filling out this form please call the

# Probate Helpline 0300 123 1072

We cannot provide legal advice

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

	Full name	the grant because an a in that name. We do no 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 the had either their permanently or principal home in E and Wales at the date death or they intended return to England and to live permanently.
2.9	Was the person who has died or any of their relatives legally adopted in or out of the family?	<b>Note 2.9</b> – If you answ Yes to this question we may require additiona information to be sub
	No, go to question 2.11	once we have received

2.10 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 <b>in</b> or <b>out</b>

**Note 2.7** – These names must be ones that will appear on asset is ot need

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vered е mitted d your application.

2.11 What was the marital status of the person who has died when they died	:
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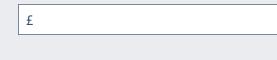
- Never married
- Widowed, their lawful spouse or civil partner having died before them

Married/in a civil partnership - give date
Divorced/civil partnership is dissolved - give date

Judi	cially	/ sep	arat	ed - g	give	date	

- **2.12** What is the name of the court where the Decree Absolute, Decree of Dissolution of Partnership or Decree of Judicial Separation was issued?
- 2.13 Did the person who has died own any foreign assets?

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



- No
- **2.14** 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

**Note 2.11** – 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.

**Note 2.14** – 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.

# 3. Relatives of the person who has died

**3.1** Did the person who has died leave a surviving lawful spouse or civil partner?

Yes

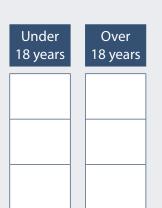
No

- **3.2** How many of the following blood and adoptive relatives did the person who has died have?
  - 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?
  - How many children of people at 'b' who survived them?

Please confirm that if any of the applicants are grandchildren of the deceased (3.2c) that their parent is one of the persons referred to at 3.2b. If they are not then they are not able to apply.

Yes

If you have entered details in any of the boxes above go to Q3.5. If not then proceed to question 3.3



**Note 3.1** – 'survive' means that they were alive when the deceased person died.

**Note 3.2** – Please state the **number** of relatives the person who has died had in the relevant sections. If none then put nil or strike through. If you are unsure about the relationships of the persons applying then contact HMCTS Probate.

**Note** – Depending on the value of the net estate the lawful spouse/civil partner may not be the only person entitled to the estate of the deceased. Please seek legal advice regarding the distribution of the estate.

All relatives from the same category as the applicant are entitled to share in the estate including children/issue of any who have predeceased. You should seek legal advice regarding distribution of the estate if you are in any doubt. **3.3** How many of the following blood and adoptive relatives did the person who has died have?

If you have filled in details in any of the sections in question 3.2, then go to question 3.5

		Under 18 years	Over 18 years	
d	How many parents of the person who has died survived them?			
e	How many Whole-blood brothers or sisters of the person who has died survived them?			
f	How many Whole-blood brothers or sisters of the person who has died did not survive them?			
g	How many Children of people at section (f ) survived them?			
h	How many Half-blood brothers or sisters of the person who has died survived them?			
i	How many Half-blood brothers or sisters of the person who has died did not survive them?			
j	How many Children of people at section (i) survived them?			

Please confirm that if any of the applicants are nephews or nieces of the whole or half blood of the deceased (questions 3.3g and 3.3j) that their parent is one of the persons referred to at 3.3f or 3.3i. If they are not then they are not able to apply.

Yes

If you have entered details in any of the boxes above go to Q3.5. If not then go to question 3.4.

**Note 3.3** – Once you have entered a number in one of the block sections (e.g. d to j) you should go to question 3.5.

Step-relatives should not be included.

A '**whole-blood**' brother or sister is someone who has both parents in common with person who has died, or someone who was legally adopted by both of the parents of the person who has died.

A '**half-blood**' brother or sister is someone who has only one parent in common with the person who has died, or someone who was legally adopted by only one of the parents of the person who has died. 3.4 How many of the following blood and adoptive relatives did the person who has died have?

If you have filled in details in any of the sections in question 3.3, then go to question 3.5.

		Under 18 years	Over 18 years
а	How many Grandparents of the person who has died survived them?		
b	How many Whole-blood uncles or aunts of the person who has died survived them?		
c	How many Whole-blood uncles or aunts of the person who has died did not survive them?		
d	How many Children of people at 3.4c who survived them?		
е	How many Half-blood uncles or aunts of the person who has died survived them?		
f	How many Half-blood uncles or aunts of the person who has died did not survived them?		
g	How many Children of people at 3.4f who survived them?		

Please confirm that if any of the applicants are cousins of the whole or half blood of the deceased (questions 3.4d and 3.4g) and that their parent is one of the persons referred to at 3.4c or 3.4f. If they are not then they are not able to apply.

Yes

**3.5.** 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

**Note 3.4** – this section should only be completed if no relatives have been entered in section 3.3. Please state the number of relatives the person who has died had in the relevant sections. If none then put nil or strike through.

Step-relatives and people who were related to the person who has died only by marriage should not be included.

A 'whole-blood' uncle or aunt is someone who has both parents in common with the mother or father of the person who has died, or someone who was legally adopted by the maternal or paternal grandparents of the person who has died.

A '**half-blood**' uncle or aunt is someone who has only one parent in common with the mother or father of the person who has died or someone who was legally adopted by only one of the grandparents of the person who has died.

# 4. Applying as an attorney

**4.1** Are you applying as an attorney on behalf of one or more people who are entitled to apply for a Grant of Representation? **Please read Note 4 before proceeding.** 

Yes, go to question 4.2

No, go to section 5

**4.2** Please give the full names of the person or people on whose behalf you are applying and their relationship to the person who has died.

#### 4.3 Please give their address

**Building and street** 

Second line of address

Town or city

County (optional)

#### Postcode

**4.4** 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 the Probate Registry.No

**4.5** 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 to apply for a grant of representation?

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

No

**Note 4** – 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 you a further form for the person who is appointing you as their attorney to sign.

Please visit GOV.UK (gov.uk/ wills-probate-inheritance/ if-youre-an-executor) to print off the PA12 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.

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 4.4** – 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.

In some cases you may be asked to provide medical evidence. 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 certifgicate or call 0117 9302430 and quote 'medical evidence' and we will send the form.

4.6	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)?	<b>Note 4.6</b> – an LPA must be registered with the Office of the Public Guardian before it can be used.
	of it certified on every page.) with your application No, go to Section 6	
4.7	Has the Enduring Power of Attorney (EPA) been registered with the Office of the Public Guardian?  Yes No	

# 5. Foreign domicile

Note – if you answered Yes, to question 2.8 you don't need to complete this section – please go to Section 6.

- **5.1** What was the country where the person who died either lived permanently at the date of death or intended to return to live permanently?
- **5.2** What does the estate in England and Wales of the person who has died consist of?

Assets	Values
Has an entrusting document been issued by the court where the person who	
has died was domiciled?	Note 5.3 and 5.4 – these documents may help to
Yes, please provide the official document with your application; if it is not in English, please also provide an official translation.	support your application. If you do not have any of

not in English, please also provide an official translation. Go to Section 6.

No

5.3

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

No

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these documents, you may

wish to seek legal advice.

# 6. Inheritance tax

<b>6.</b>	Did the deceased die on or after 1 January 2022?	<b>Note 6</b> – Before you can apply for a probate grant you need to value the estate
	<ul> <li>Yes. Go to question 6.2</li> <li>No. Go to Section 7</li> </ul>	of the person who has died. Then you need to pay any Inheritance Tax that is due or be able to show that there is
6.2	<ul> <li>Which form did you complete?</li> <li>I did not have to submit any forms to HMRC. Go to question 6.3 (The IHT checker tool is not a form)</li> <li>IHT400. Go to question 6.6</li> <li>IHT400 and IHT421. Go to question 6.7</li> <li>IHT207. Go to question 6.8</li> </ul>	no Inheritance Tax to pay. Read how to value the estate and report its value to HMRC at https://www.gov.uk/ valuing-estate-of-someone- who-died
6.3	Provide the following values of the estate for inheritance taxgross value of the estate for inheritance taxfnet value of the estate for inheritance taxfnet qualifying value of the estatef	<b>Note 6.3</b> – The gross, net and net qualifying value for IHT will be provided if you used the IHT checker tool accessible at https://www. gov.uk/valuing-estate-of- someone-who-died/estimate- estate-value
6.4	Are you claiming against this estate the unused proportion of the inheritance tax nil-rate band of a pre-deceased spouse or civil partner of the deceased?  Yes No	<b>Note 6.4</b> – Only answer this question if the net qualifying value of the estate is between £325,000 and £650,000
6.5	Provide the gross and net value of the estate for probate         gross value of the estate for probate         f         net value of the estate for probate	<b>Note 6.5</b> – Guidance on how to calculate these values can be found at https://www. gov.uk/applying-for-probate/ before-you-apply

Go to Section 8

6.6		er from HMRC with your uniqu letter from HMRC was	e probate code?	<b>Note 6.6</b> – The letter from HMRC will be sent out up to 20 working days after you submit your IHT400. If the letter
	The probate val	ues from the HMRC letter		has still not arrived after 20 working days, contact HMRC
	Gross value	£	]	by calling 0300 123 1072.
	Net value	£		
		Go to Section 8		
	No. Go to question	6.7		
6.7	Provide the numbers fro	om the <b>IHT421</b>		<b>Note 6.7</b> – Forms IHT421 and IHT400 must be sent to HMRC only.
	Box 3 (gross value) Box 5 (net value)	£	]	After sending them to HMRC wait 20 working days before submitting this probate application.
6.8	Go to Section 8 Provide the numbers fro Box A (gross value)	om the <b>IHT207</b> £	]	For details go to www.gov.uk/ hmrc/inheritance-tax-account If the amount in Box 5 is more than £5,000 you will have to pay a probate application fee.
	Box H (net value) Go to Section 8	£		<b>Note 6.8</b> – Send HMCTS the IHT207 with your probate application. If the amount in Box H is more than £5,000 you will have to pay a probate
				application fee.

7.	Inheritance tax where the deceased died on or before 31 December 2021	
7.1	Which IHT forms did you complete?	
	IHT205. Go to question 7.2	
	IHT400 only. Go to question 7.3	
	IHT400 and IHT421. Go to question 7.4	
	IHT207. Go to question 7.5	
7.2	Provide the numbers from the IHT205 form.	Note 7.2 – Send HMCTS the
	Box D (gross value)	IHT205 with your probate application. Include the IHT217 form if applicable. If
	Box F (net value) £	the amount in Box F is more than £5,000 you will have to
	Go to Section 8	pay a probate application fee.
7.3	Have you received a letter from HMRC with your unique probate code?	Note 7.3 – The letter from
	Yes. The code in the letter from HMRC was	HMRC will be sent out up to 20 working days after you submit
		your IHT400. If the letter
	The probate values from the HMRC letter	has still not arrived after 20 working days, contact HMRC by calling 0300 123 1072.
	Gross value £	.,
	Net value £	
	Go to Section 8 No. Go to question 7.4	<b>Note 7.4</b> – Forms IHT421 and IHT400 must be sent to HMRC only.
		After sending them to HMRC
7.4	Provide the numbers from the IHT421	wait 20 working days before submitting this probate
	Box 3 (gross value) £	application.
	Box 5 (net value) £	For details go to www.gov.uk/ hmrc/inheritance-tax-account
	Go to Section 8	If the amount in Box 5 is more than £5,000 you will have to pay a probate application fee.
7.5	Provide the numbers from the IHT207	Note 7.5 – Send HMCTS the IHT207 with your probate
	Box A (gross value)	application. If the amount in Box H is more than £5,000 you will have to pay a probate
	Box H (net value)	application fee.

Go to Section 8

# 8. Legal statement

#### The undersigned confirms:

- 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
- that the estate is an 'excepted estate' and that the person who died was domiciled in the UK (if 'Yes' was given in answer to question 2.8 and question 6.5 or 7.2)

## If the Probate Registry (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 <b>first applicant</b>	Name of <b>second applicant</b>
Signature	Signature
Date signed	Date signed
Name of <b>third applicant</b>	Name of <b>fourth applicant</b>
Signature	Signature
Date signed	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 appl
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In what capacity are the persons applying entitled to apply?

The undersigned is the wife or husband or civil partner of the person who has died
The undersigned is or are the child/children of the person who has died
The undersigned is or are the grandchild/grandchildren of the person who has died being the son or daughter of a child who died in the lifetime of the person who has died.
The undersigned is or are the parent/parents of the person who has died
The undersigned is or are the brother(s) or sister (s) of of the whole/half blood of the person who has died
The undersigned is or are the niece/nephew (s) of the whole/half blood of the person who has died being the son or daughter of a brother or sister of the person who has died who died in their lifetime.
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.

# 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



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.

# Equality and diversity questions

⊑qι	ally and diversity questions
1.	What is your main language?
	English, go to question 3
	Welsh, go to question 3
	Other, give details (including British sign language)
	Prefer not to say, <b>go to question 3</b>
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 I	rish or British	
lrish				

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?

	50
<u>TR</u>	29
	275

	Yes,	go	to	question	7
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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
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🗌 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
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Prefer not t	to say
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13. Are you married or in a legally registered civil partnership?

Yes		

🗌 No

Prefer r	not to say	1
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# 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**

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