

**STATE OF MICHIGAN  
PROBATE COURT  
WAYNE COUNTY**  
**www.wcpc.us**

# **ACCEPTANCE OF APPOINTMENT**

**CASE NO. and JUDGE**

Court address

1305 Coleman A. Young Municipal Center, 2 Woodward Ave. Detroit, MI 48226-3447

Court telephone no.

(313) 224-5706

In the matter of

\_\_\_\_\_  
First, middle, and last name

1. I have been appointed \_\_\_\_\_ of the person/estate.

\_\_\_\_\_  
Type of fiduciary

2. I accept the appointment, submit to personal jurisdiction of the court, and agree to file reports and to perform all required duties.

☐ 3. For a period of \_\_\_\_\_ days from the date of my appointment, I exclude from the scope of my responsibility the  
not to exceed 91 days

following real estate or ownership interest in a business entity:

\_\_\_\_\_  
Describe real property or business interest

because I reasonably believe the real estate or other property owned by the business entity is or may be contaminated by a  
hazardous substance, or is or has been used in an activity directly or indirectly involving a hazardous substance that could  
result in liability to the estate or otherwise impair the value of property held by the estate.

4. ☐ If possible, I prefer to receive notices from the Court by email:

(for quicker processing, otherwise, documents will be mailed)

\_\_\_\_\_  
(type or print email address)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Attorney name (type or print)

\_\_\_\_\_  
Bar no.

\_\_\_\_\_  
Name (type or print)

\_\_\_\_\_  
Attorney address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip

\_\_\_\_\_  
Telephone no.

\_\_\_\_\_  
City, state, zip

\_\_\_\_\_  
Telephone no.

\_\_\_\_\_  
Put DOB in row 10 on MC97a.

\_\_\_\_\_  
Date of birth