



# NOTICE OF ESCHEAT PROPERTY

County \_\_\_\_\_

Probate \_\_\_\_\_

Notice is hereby given pursuant to Chapter 11.08 RCW, that the decedent named below is not survived by any person appearing to be entitled to the estate under the laws of this state, and that the estate therefore constitutes escheat property subject to the provisions of Chapter 11.08 RCW.

Under the provisions of RCW 11.28.120(5)(a), the Director of the Washington State Department of Revenue, or the Director's designee, has the right to serve as personal representative of such escheat estate.

### General Questionnaire:

Please answer all questions to the best of your knowledge.

Name of decedent \_\_\_\_\_  
 (Last) (First) (Initial)

Address \_\_\_\_\_  
 (Street) (City) (State) (Zip Code)

Date of death \_\_\_\_\_ County \_\_\_\_\_

**I. ASSETS:** Nature and location of Washington estate.

A. Intangibles (bank accounts, cash, stock, bonds, etc.) – Use additional sheets if necessary.

<u>Value</u>	<u>Location (bank branch, etc.)</u>
_____	_____
_____	_____
_____	_____

B. Washington real property (legal description and assessed value)

\_\_\_\_\_

C. Personal effects (description and location) \_\_\_\_\_

**II. DEBTS:** To the best of my knowledge the debts of the estate are as follows:

A. Funeral \_\_\_\_\_

B. Last illness \_\_\_\_\_

C. Others (describe) \_\_\_\_\_

My interest in this estate is as a  creditor or  an interested party other than a creditor. (describe below).

Signed \_\_\_\_\_

**Please print the following:**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Please complete and mail this form to: Washington State Department of Revenue  
 Estate Tax Section  
 P.O. Box 47488  
 Olympia, WA 98504-7488

For tax assistance visit <http://dor.wa.gov> or call (360) 570-3265, option 2. To request this document in an alternate format call 1-800-647-7706. Teletype (TTY) users may call (360) 705-6718.

**For Department Use Only:**

The Estate Tax Examiner of the Miscellaneous Tax Section of the Washington State Department of Revenue hereby:

- Elects to serve a personal representative and designates the following to represent the Department, with petition for appointment to be made in the near future:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, and Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

- Declines to serve as personal representative under Chapter 11.28 RCW. Please note, the Department's waiver to serve under Chapter 11.28 does not, in any way effect the provisions of Chapter 11.08 RCW which provides for specific notation during the administration of an escheat and the ultimate conveyance of the escheated property to the Department of Revenue for the benefit of the common school fund.

Copies of letters of administration issued in this estate must be forwarded to the Department of Revenue, P.O. Box 47488, Olympia, WA 98504-7488. Failure to comply with the provisions of Chapter 11.08 RCW in respect to notification to the Department will result in any orders being void for lack of jurisdiction.

Signed \_\_\_\_\_

Estate Tax Examiner  
Miscellaneous Tax Section  
Washington State Department of Revenue