

STATE OF SOUTH CAROLINA)
)
COUNTY OF: _____)
)
IN THE MATTER OF: _____)
)

IN THE PROBATE COURT

**APPLICATION FOR RESTRAINT OR PERFORMANCE OF
PERSONAL REPRESENTATIVE**

CASE NUMBER: _____

Applicant: _____

1. Give your relationship to the decedent, if any, and your interest in this proceeding.

2. I request an Order of RESTRAINT PERFORMANCE of _____,
Personal Representative in this estate, because (please set out your specific demands):

Executed this _____ day of _____, 20_____.

Signature: _____

Name: _____

Address: _____

Telephone (O): _____

(H): _____

Email: _____

Attorney: _____

Address: _____

Telephone (O): _____

Email: _____

TEMPORARY ORDER OF RESTRAINT/PERFORMANCE

IT IS HEREBY ORDERED that the following conditions be imposed on _____, the Personal Representative in the above estate.

RESTRICTIONS:

PERFORMANCE DUTIES:

Executed this _____ day of _____, 20_____.

_____, Probate Court Judge

ORDER FOR HEARING

IT IS ORDERED that a hearing on this matter be set for:

DATE: _____

TIME: _____

PLACE: _____

Pursuant to SCPC Section 3-607(b), the Applicant is ordered to give notice of this hearing by copy of this Application and Order(s) to the Personal Representative, the attorney of record and _____ as follows:

Executed this _____ day of _____, 20_____.

_____, Probate Court Judge