

# Minor Conservatorships

## Filing Procedures

These instructions have been prepared by the Leelanau County Probate Court staff to assist you in correctly completing the conservatorship process. **The Probate Court staff will assist you if you have further questions about procedures; however, staff is prohibited from giving legal advice.** If you do not understand these instructions or are not able to fill out the petition and other forms by yourself, you may want to speak to an attorney.

**Filing Fee**     \$150.00

**Required for Filing**

- [PC 667](#), What You Need to Know before Filing a Petition to Appoint a Conservator
- [PC 639](#), Petition for Appointment of Conservator and/or Protective Order
- [PC 571](#), Acceptance of Appointment – one for each nominated conservator
- [PC 570](#), Bond of Fiduciary (if ordered)
- [Records Check Release – Minor](#) – one for each nominated conservator

**Hearing Date** Upon filing, a hearing date will be set, typically 3-4 weeks after the petition is filed. The court will generate a Notice of Hearing and enough copies of the Petition and Notice for the Petitioner to serve on all interested persons.

You, the Petitioner, must attend the hearing or your Petition will be dismissed. When you arrive for the hearing please check in at the Probate Court office to make sure the court has received all proofs of service and other documentation required before the hearing is held.

**Notice to Interested Persons**     **It is the Petitioner's responsibility to serve all interested persons with a copy of the Petition and Notice of Hearing and file Proof of Service with the Court.** If you do not complete service, the hearing will need to be rescheduled and re-noticed.

Personal Service means delivering copies to the individual in person.

Service by Mail means mailing copies (only first class mail is required).

Publication is required for persons whose address or whereabouts are unknown. See below.

The minor, if age 14 or older, must be served personally:

- At least 24 hours prior to an emergency hearing for a special conservator.
- At least 7 days prior to the regular hearing to appoint a conservator.

Other interested persons must be served:

- At least 14 days prior to the hearing if service is by mail or publication.
- At least 7 days prior to the hearing if served personally.

**Interested persons** on a Petition for Appointment of Conservator or Protective Order:

- The minor if 14 years of age or older;
- The parents or presumptive heirs of the minor;
- The proposed conservator;

- A governmental agency paying benefits to the minor or before which an application is pending.

### **Government Agencies**

When any of the following are parties of interest on your petition, they must be served, either personally or by mail at:

Mr. Dean Slicer, Fiduciary Hub  
**US Dept. of Veterans Affairs**  
 575 N. Pennsylvania St.  
 Indianapolis, IN 46204  
 \*Serve if individual receives VA benefits

Assistant **Attorney General**  
 State Public Administration  
 PO Box 30736  
 Lansing, MI 48909  
 \*Serve if individual has no presumptive heirs

**Social Security Administration**  
 1329 South Division St.  
 Traverse City, MI 49684  
 \*Serve if individual receives Soc. Sec. benefits

**Michigan Dept. of Human Services**  
 701 S. Elmwood, Suite 19  
 Traverse City, MI 49684  
 \*Serve if individual receives DHS assistance

### **Proof of Service**

The petitioner must file a Proof of Service ([PC 564](#)) with the Probate Court before the hearing date indicating all the interested parties have received the above documents. No hearing can be held without it. Note the separate sections for "Service by Mail" and "Personal Service" and use them accordingly. See also [Instructions for Proof of Service](#).

### **Publication**

If the address of an interested person is unknown, the Petitioner must file a Declaration of Intent to Give Notice by Publication, ([PC 617](#)) and publish (at your expense) a Publication of Notice of Hearing, ([PC 563](#)). Notice must be published in the county where the court is located one time at least **14 days** before the hearing. The Petitioner must pay the newspaper for this publication in order for the notice to be published in the paper. The newspaper should send us verification of publication; however, it is your responsibility to make sure it is received by the court.

For more information on publication, you may wish to contact:

Leelanau Enterprise  
 7200 E. Duck Lake Rd.  
 Lake Leelanau, MI 49653  
 (231) 256-9827  
[legals@leelanaunews.com](mailto:legals@leelanaunews.com)

### **Guardian ad Litem**

The court may appoint a Guardian ad Litem (GAL) to represent the interests of the minor for whom a conservator is sought. The GAL is not an employee of the court but a licensed practicing attorney appointed by the court.

### **After Appointment**

Within **28 days** after appointment, or as otherwise directed by the Court, the Conservator must file a Proof of Restricted Account/Verification of Funds on Deposit ([PC 669](#)) showing the financial institution's agreement that the funds will not be released without court order. This form must be filed again each year along with a statement showing the balance in the account(s).

Within 56 days of appointment, an Inventory ([PC 674](#)) of the minor's assets must also

be filed and copies served on the Interested Persons. A Proof of Service ([PC 564](#)) is filed with the court to show this has been done. See also [Minor Conservatorship – Getting Started & Inventory](#)

**Court  
Contact**

Leelanau County Probate Court  
8527 E. Government Center Dr., Suite 203  
Suttons Bay, MI 49682  
(231) 256-9803 PH  
(231) 256-9845 FAX  
[probate-juvenilecourt@co.leelanau.mi.us](mailto:probate-juvenilecourt@co.leelanau.mi.us)

Susan L. Richards, Probate Register  
[srichards@co.leelanau.mi.us](mailto:srichards@co.leelanau.mi.us)

## WHAT YOU NEED TO KNOW BEFORE FILING A PETITION TO APPOINT A CONSERVATOR

### »» What is a conservator?

A conservator is a person appointed by a probate court and given power and responsibility for the estate (financial assets and property) of an adult (called a *protected individual*).

### »» What is a guardian?

A guardian is a person appointed by a probate court and given power and responsibility to make certain decisions about the care of another individual. These decisions might include treatment decisions or where the individual should live. If the individual has a reduced life expectancy due to advanced illness, the guardian may have the power to make an informed decision on behalf of the individual regarding receiving, continuing, discontinuing, or refusing medical treatment. A **full guardian** can make all decisions for the individual. A **limited guardian** can only make decisions for the individual that the court allows.

### »» When would a conservator be needed?

A conservator may be needed when the individual is unable to manage his or her property and financial affairs effectively because of certain reasons and:

- 1) he or she has property that will be wasted or used up unless proper management is provided; or
- 2) funds are needed for the support, care, and welfare of the adult and any of his or her dependents.

A mentally competent adult who, because of age or physical limitation, may voluntarily petition the

court himself or herself for the appointment of a conservator to assist in managing his/her estate.

Some of the reasons that might prevent the individual from being able to manage his or her property and financial affairs are:

- 1) mental illness or deficiency;
- 2) physical illness or disability;
- 3) chronic use of alcohol /other intoxicants;
- 4) confinement;
- 5) detention by a foreign power; or
- 6) disappearance.

### »» Is a conservator needed for an individual who cannot manage his or her property or financial affairs effectively?

A conservator might not be necessary if someone else already has legal authority (an individual with power of attorney, for example) to make decisions about the individual's estate and there are no problems with the decisions being made.

### »» How is a proceeding for a conservator started?

Any person who is interested in the individual's welfare may complete a Petition for Appointment of Conservator (form PC 639) and file it, along with the filing fee, with the probate court.

### »» Is a lawyer necessary?

No, but a lawyer can be helpful, especially if any interested person opposes the appointment of a conservator.

### »» Can mediation be used for disagreements about a conservator?

Certain disagreements about a request for a guardian may be mediated outside the court if all parties agree to attend mediation or if a judge order parties to attend mediation. The court clerk can tell you if

mediation services are available in your court.

### »» What happens when the court accepts the petition for filing?

After the petition is accepted for filing, the court will appoint a *guardian ad litem* to represent the individual in the court proceeding unless the individual has his or her own lawyer or unless a mentally competent adult voluntarily requests the appointment.

It is important for you to cooperate with the guardian ad litem. The guardian ad litem does not have the authority to make decisions for the individual. The individual may have to pay for the guardian ad litem.

If necessary, the court may also order the individual to be examined by a physician or a mental health professional. The court may also send someone (called a *visitor*) to interview the individual. The visitor may be the guardian ad litem or a court officer or court employee.

### »» Can the individual get a conservator immediately in an emergency?

If the court believes an individual's estate requires immediate protection before appointing a conservator, the court may issue a preliminary protective order. This order may involve the appointment of a special conservator. The order will authorize specific acts that provide for immediate protection of the individual's assets.

STATE OF MICHIGAN  
PROBATE COURT  
COUNTY OF \_\_\_\_\_

PETITION FOR  
 APPOINTMENT OF CONSERVATOR  
 PROTECTIVE ORDER

FILE NO. \_\_\_\_\_

**(A)** Estate of \_\_\_\_\_ XXX-XX-  
Individual alleged to need protection Last four digits of SSN

**(B)** 1. I, \_\_\_\_\_, am interested in this matter  
Name  
and make this petition as \_\_\_\_\_  
State interest/relationship

**(C)** 2. The individual was born \_\_\_\_\_, resides in \_\_\_\_\_ County  
Date  
at \_\_\_\_\_  
Address  
\_\_\_\_\_ and has property in \_\_\_\_\_ County.  
City, state, zip

**(D)**  3. An action within the jurisdiction of the family division of circuit court involving the family or family members of the above individual has been previously filed in \_\_\_\_\_ Court, Case Number \_\_\_\_\_, was assigned to Judge \_\_\_\_\_, and  remains  is no longer pending.

**(E)** 4. The individual has  a power of attorney. (Specify name and address below.)  
 a guardian. (Specify name and address below.)  
 a representative payee for social security. (Specify name and address below.)

\_\_\_\_\_  
Name and address

**(F)** 5.  a. The individual is an adult unable to manage his/her property and business affairs effectively because of  
 mental illness  chronic use of drugs  detention by a foreign power  
 mental deficiency  chronic intoxication  disappearance  
 physical illness or disability  confinement  \_\_\_\_\_  
and either  
 the adult has property that will be wasted or dissipated unless proper management is provided, or  
 the adult or his/her dependents are in need of money for support, care, and welfare, and protection is necessary to obtain or provide money.  
 b. The adult petitioner is mentally competent but because of age or physical infirmity is unable to manage his/her property and affairs effectively, and recognizing the disability, requests appointment of a conservator.  
 c. The individual is a minor who  
 owns money or property that requires management or protection that cannot otherwise be provided.  
 has or may have business affairs that may be jeopardized or prevented by minority.  
 needs money for support and education, and protection is necessary or desirable to obtain or provide money.  
 d. I am the guardian of the ward and it is in the ward's best interests to sell or otherwise dispose of the ward's real property or interest in real property.

**(G)** 6. The statements in item 5 are supported by the following facts: \_\_\_\_\_  
(Attach a separate sheet.)

(SEE SECOND PAGE)

**USE NOTE:** If this form is being filed in the circuit court family division, please enter the court name and county in the upper left-hand corner of the form.

Do not write below this line - For court use only

**H** 7. The individual to be protected has an estate approximately valued at:

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_  
Real property Personal property Insurance Monthly income

**I** 8. The individual to be protected is receiving the following benefits from governmental agencies:  
 Social Security \$ \_\_\_\_\_  SSI \$ \_\_\_\_\_  Veterans Administration \$ \_\_\_\_\_, claimant number \_\_\_\_\_  
 MDHS \$ \_\_\_\_\_  Other: \_\_\_\_\_ \$ \_\_\_\_\_

**J** 9. The individual to be protected has  
 a spouse whose name and address are listed below.  
 child(ren) whose name(s) and address(es) are listed below.  
 descendants of deceased child(ren) whose name(s) and address(es) are listed below.  
 if no child(ren) or descendants of deceased child(ren), parents whose name(s) and address(es) are listed below.  
 if none of the above, presumptive heirs whose name(s) and address(es) are listed below.  
 none of the above (must notify the Attorney General - see instructions for the address of the Attorney General).

NAME	ADDRESS AND TELEPHONE NUMBER				RELATIONSHIP	AGE/DOB (if minor)
	Street address					
	City	State	Zip	Telephone no.		
	Street address					
	City	State	Zip	Telephone no.		

**K** 10. None of the persons named above are under any legal incapacity except

\_\_\_\_\_  
Name, incapacity, and representative of the person, if any

**L** 11. The individual is currently found at \_\_\_\_\_  
Address or location Telephone no.

**M**  12. It is necessary that a preliminary protective order be entered pending the regular hearing because

\_\_\_\_\_

**I REQUEST** that the court:

**N**  13. Appoint \_\_\_\_\_,  
Name, address, and telephone no.  
who has priority as \_\_\_\_\_, as conservator of the estate to be protected.  
Priority relationship

**O**  14. Preserve and apply the individual's property pending the appointment of a conservator as follows:

\_\_\_\_\_

**P**  15. Enter a protective order that provides \_\_\_\_\_.

**Q**  16. Appoint the guardian as special conservator with authority to sell or otherwise dispose of the ward's real property or interest in real property.

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

**R** \_\_\_\_\_  
Attorney signature Date

\_\_\_\_\_  
Attorney name (type or print) Bar no. Petitioner signature

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

\_\_\_\_\_  
City, state, zip Telephone no. City, state, zip Telephone no.

**S**  17. **NOMINATION BY PERSON TO BE PROTECTED:** I am 14 years of age or older. I nominate as my conservator

\_\_\_\_\_  
Name, address, and telephone no.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of person to be protected

## INSTRUCTIONS FOR COMPLETING "PETITION FOR APPOINTMENT OF CONSERVATOR"

**Please type or print neatly in black or blue ink.** Items A through S must be read and filled in (when required) before your petition can be filed with the court. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Enter the name of the individual who you believe needs a conservator.
- B** Enter your name in the first line. Enter your relationship to the individual (or your interest) in the second line.
- C** Enter the date the individual was born; what county the individual is a resident of; the address of the place where the individual normally lives, and the county the individual's property is in.
- D** Check this box if there is or has been a case in the family division of the circuit court involving the individual in **A**. Examples of a family division case are personal protection, abuse or neglect, or a name change. If you have checked this box, enter the name of the court, the case number of the action, the name of the judge assigned to that case. Then place a check in the box indicating whether that case is still pending or not.
- E** Check the boxes that apply and provide the name(s) and address(es). If the individual has a power of attorney and you have a copy of the document, make a copy for the court.
- F** Check the boxes that you believe apply to the individual.
- G** **Explain in as much detail as possible** the specific facts about the individual's conduct or condition that lead you to believe he or she needs a conservator. Give specific examples of his or her conduct that supports what you checked in **F** and that demonstrate the need for a conservator. **This information is extremely important for the court in making a decision about the need to appoint a conservator.** If you are the guardian asking for authority to sell or otherwise dispose of your ward's real property, state the reasons why it is in the ward's best interest to do so.
- H** Specify the approximate value of any real property, personal property, insurance, and monthly income of the individual. An example of real property is a house. Examples of personal property are home furnishings, bank accounts, and checking accounts.
- I** Check whether the individual is currently receiving benefits from governmental agencies and the amount(s).
- J-K** Check all the boxes that apply and enter the names, relationships, addresses and telephone numbers of each relative of the individual. If any of the adults named in **J** are under legal incapacity, enter the names in **K**. If you check the last box in **J** (item 9), you must notify the Attorney General by sending a copy of this form to: Attorney General, Public Administration, PO Box 30755, Lansing, Michigan 48909.
- L** Enter the address and telephone number where the individual is currently located. This address and telephone number may or may not be the home of the individual. For example, if the individual is currently in the hospital, enter the name, address, and telephone number of the hospital.
- M** If there is an emergency that requires that a preliminary protective order be entered before the hearing, check the box and state the reason(s).
- N** Enter the name, address, and telephone number of the person you want to be appointed as conservator of the individual. Enter the relationship, if any, that this person has to the individual. If you are the guardian asking for authority to sell or otherwise dispose of your ward's real property, leave this blank and complete **Q**.
- O** Check this box only if you checked **M**.
- P** Check this box if you want the individual's property protected but you do not want a conservator appointed.
- Q** Check this box if you want the the guardian appointed special conservator to dispose of real property.
- R** Enter today's date, sign your name, and enter your address and telephone number.
- S** If the individual wants to nominate someone to be the conservator, check the box and enter the name, address, and telephone number of the person the individual is nominating. The individual must sign and date the form.

STATE OF MICHIGAN  
PROBATE COURT  
COUNTY OF

ACCEPTANCE OF APPOINTMENT

FILE NO.

In the matter of \_\_\_\_\_

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.

\_\_\_\_\_  
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.

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

**USE NOTE:** If this form is being filed in the circuit court family division, please enter the court name and county in the upper left-hand corner of the form.

Do not write below this line - For court use only



<b>STATE OF MICHIGAN PROBATE COURT COUNTY CIRCUIT COURT - FAMILY DIVISION</b>	<b>BOND OF FIDUCIARY</b>	<b>FILE NO.</b>
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Estate of \_\_\_\_\_

1. The principal has been appointed \_\_\_\_\_, accepts the duties of this appointment and, with the surety(ies), agrees to pay \$ \_\_\_\_\_ to the State of Michigan as obligee for the benefit of the persons interested in the estate if the principal fails to discharge all duties according to law.  
Type of fiduciary
2. The surety(ies) agree to be jointly and severally liable on the bond with the principal and with each other.
3. The surety(ies) consent to the jurisdiction of the court that issued letters of authority to the principal in a proceeding pertaining to the principal's fiduciary duties.
4. If this is a bond for a special personal representative who is subsequently appointed personal representative, the obligations and liabilities of this bond remain in effect.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal signature

\_\_\_\_\_  
Attorney name (type or print) Bar no.

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
Surety signature

\_\_\_\_\_  
Surety signature

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

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
City, state, zip Telephone no.

**Oath of Personal Surety** The surety acknowledges personal worth of the amount of the penalty in the bond over and above all debts and legal exemptions.

Subscribed and sworn to before me on \_\_\_\_\_, \_\_\_\_\_ County, Michigan.  
Date

My commission expires: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date Notary public/Deputy probate register

Notary public, State of Michigan, County of \_\_\_\_\_

Do not write below this line - For court use only

I have examined and approve this bond.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Judge/Probate register Bar no.

No new letters of authority are to be issued.

In the Matter of \_\_\_\_\_, **Minor**

Probate Court File No.: \_\_\_\_\_

**RECORDS CHECK RELEASE FOR PROPOSED  
GUARDIAN AND/OR CONSERVATOR OF A **MINOR****

The Leelanau County Probate Court routinely completes guardianship/conservatorship investigations as required by law. Pursuant to this requirement, it is the policy of this Court to complete a Children's Protective Central Registry check and a Criminal/Driving history check.

Provide the following Information regarding the proposed guardian and/or conservator.

Release Form to be Completed for Each Proposed Guardian and/or Conservator

NAME: \_\_\_\_\_

Race: \_\_\_\_\_ Gender  M  F

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Driver License #: \_\_\_\_\_

Maiden/other name(s) previously used:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

I authorize the Leelanau County Probate Court to conduct a criminal/driving history check and request information from the Department of Human Services and/or other human services agency as may be appropriate for my appointment by this Court as a guardian/conservator of a minor.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of proposed guardian/conservator

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone No.

Do not write below this line – Court use only

ICHAT Received: \_\_\_\_\_

DHS Response: \_\_\_\_\_

<p align="center"><b>STATE OF MICHIGAN PROBATE COURT COUNTY CIRCUIT COURT - FAMILY DIVISION</b></p>	<p align="center"><b>DECLARATION OF INTENT TO GIVE NOTICE BY PUBLICATION</b></p>	<p><b>FILE NO.</b></p>
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In the matter of \_\_\_\_\_

Service of \_\_\_\_\_ cannot be made on  
specify document(s)

_____ Name	_____ Address
_____ City	_____ State      _____ Zip

I intend to publish notice on this individual because his/her address or whereabouts are unknown. I have made the following diligent efforts to ascertain his/her address or whereabouts: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I declare under penalties of perjury that this declaration has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (type or print)      Bar no.

\_\_\_\_\_  
Petitioner signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip      Telephone no.

\_\_\_\_\_  
City, state, zip      Telephone no.

NOTE: Complete a separate form (PC 617) for each person to be notified by publication. When publication is completed, prepare form PC 564 (Proof of Service), and cause an affidavit of publication to be filed with the court.

Do not write below this line - For court use only

<b>STATE OF MICHIGAN PROBATE COURT COUNTY OF</b>	<b>PUBLICATION OF NOTICE OF HEARING</b>	<b>FILE NO.</b>
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In the matter of \_\_\_\_\_

TO ALL INTERESTED PERSONS including:

whose address(es) is/are unknown and whose interest in the matter may be barred or affected by the following:

**TAKE NOTICE:** A hearing will be held on \_\_\_\_\_ at \_\_\_\_\_  
Date Time

at \_\_\_\_\_ before Judge \_\_\_\_\_  
Location Bar no.

for the following purpose:

_____	_____	_____	_____
Attorney name (type or print)	Bar no.	Petitioner name (type or print)	
_____	_____	_____	_____
Address		Address	
_____	_____	_____	_____
City, state, zip	Telephone no.	City, state, zip	Telephone no.

**PUBLISH ABOVE INFORMATION ONLY**

Publish \_\_\_\_\_ time(s) in \_\_\_\_\_ in \_\_\_\_\_ County.  
Name of publication

Furnish \_\_\_\_\_ copies to \_\_\_\_\_.

Furnish affidavit of publication to the court.

Forward statement for publication charges to \_\_\_\_\_.

**USE NOTE:** If this form is being filed in the circuit court family division, please enter the court name and county in the upper left-hand corner of the form.

Do not write below this line - For court use only