

**PETITION FOR RECEIPT AND ACCEPTANCE OF FOREIGN GUARDIANSHIP AND/OR  
CONSERVATORSHIP**

INSTRUCTIONS

I. Specific Instructions

1. This form is to be used by a guardian and/or conservator as appointed by another state to transfer the guardianship and/or conservatorship to a Georgia county pursuant to O.C.G.A. §29-2-65 *et seq.*; O.C.G.A. §29-3-105 *et seq.*; O.C.G.A. §29-4-85 *et seq.*; and O.C.G.A. §29-5-125 *et seq.*
2. According to Probate Court Rule 5.6 (A), unless the court specifically assumes the responsibility, it is the responsibility of the moving party to prepare the proper citation and deliver it properly so it can be served according to law. Pages after 7 which are labeled “Court” are to be completed by the moving party, unless otherwise directed by the court.

II. General Instructions

General instructions applicable to all Georgia probate court standard forms are available in each probate court.

**IN THE PROBATE COURT OF HOUSTON  
COUNTY STATE OF GEORGIA**

**IN RE:**

\_\_\_\_\_,  
**MINOR/WARD**

\_\_\_\_\_,  
**CONSERVATOR**

)  
)  
)  
)  
)  
)  
)

**ESTATE NO.:** \_\_\_\_\_

**PETITION FOR RECEIPT AND ACCEPTANCE OF FOREIGN  
GUARDIANSHIP AND/OR CONSERVATORSHIP**

The petition of \_\_\_\_\_,  
Guardian(s) and/or Conservator(s), who reside(s) at \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_ County, Georgia, and who is/are domiciled at:  
\_\_\_\_\_ shows:

1.

Petitioner(s) was/were appointed Guardian(s) and/or Conservator(s) of the above minor/ward by  
Order dated \_\_\_\_\_, \_\_\_\_\_ as issued by the \_\_\_\_\_ Court of  
County, State of \_\_\_\_\_. The  
clerk of said Court may be contacted as the following address: \_\_\_\_\_  
\_\_\_\_\_, telephone number \_\_\_\_\_.

2.

The minor/ward, age \_\_\_\_\_, date of birth \_\_\_\_\_, social security no.  
\_\_\_\_\_, is currently domiciled at (address) \_\_\_\_\_  
\_\_\_\_\_ County, State of \_\_\_\_\_, and is presently  
located at \_\_\_\_\_,  
which is a (type of facility, if applicable) \_\_\_\_\_  
and can be contacted at (telephone number): \_\_\_\_\_.  
Said minor/ward will be relocated to the following address: \_\_\_\_\_  
\_\_\_\_\_

3.

Attached hereto as Exhibit "A" is an authenticated copy of:

- a. the order establishing the guardianship and/or conservatorship, with all attachments describing the duties and powers of the guardian and/or conservator;
- b. any orders modifying the order referenced in "a" above, including, if any, orders of transfer.

4.

Regarding other guardianship and/or conservatorship petitions pending, (initial one)

a. \_\_\_\_\_ there are none

b. \_\_\_\_\_ there is one; it has been filed in the \_\_\_\_\_ Court of \_\_\_\_\_ County, State of \_\_\_\_\_ (address) \_\_\_\_\_.

5.

(initial one):

- a. \_\_\_\_\_ The guardianship and/or conservatorship is of a minor. The following are the adult siblings of the minor:

NAME	ADDRESS
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_____
_____
_____
_____

- b. \_\_\_\_\_ The guardianship and/or conservatorship is of an adult ward. Pursuant to law, the names, addresses, and relationships of the persons to be notified are as follows: (NOTE: The law requires notice to be given to the spouse, if any, and to all living children, if any, whose addresses are known. If there are no living adult children whose addresses are known, then list at least two adults in the following order of priority: lineal descendants of the proposed ward; parents and siblings of the proposed ward; and friends of the proposed ward. In determining the persons to whom notice is required to be given according to the foregoing rules, the petitioner(s) should not be counted as persons receiving notice.)

NAME	AGE (or over 18)	ADDRESS	RELATIONSHIP
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6.

The following individuals, other than Petitioner(s), are caring for the minor/ward; have been appointed as guardian for the minor/ward; or have been appointed conservator for the minor/ward (or enter "not applicable"):

NAME	ADDRESS	RELATIONSHIP OR APPOINTED TITLE
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7.

The following individual(s), other than Petitioner(s), is/are acting as legal representative, legal counsel, guardian ad litem, or court visitor by the court having jurisdiction over the current guardianship and/or conservatorship (or enter "not applicable")

NAME	ADDRESS	RELATIONSHIP OR APPOINTED TITLE
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8.

If there is a conservatorship, the following is the name and address of the surety on the conservator's bond (or enter "not applicable")

NAME	ADDRESS
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9.

All known income and assets of the proposed ward are shown on page 6 attached hereto.

10.

The transfer of said guardianship and/or conservatorship to Georgia is in the best interest of the minor/ward because \_\_\_\_\_

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11.

Additional Data: Where full particulars are lacking, state here the reasons for any such omission.

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WHEREFORE, your Petitioner(s) pray(s) that

1. notice be served as required by law;
2. a hearing be held on the matter; and
3. this Court receive and accept the foreign guardianship and/or conservatorship.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Signature of second Petitioner, if any

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number

Signature of Attorney: \_\_\_\_\_

Typed/printed name of Attorney: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ State Bar # \_\_\_\_\_

**VERIFICATION**

GEORGIA, \_\_\_\_\_ COUNTY

Personally appeared before me the undersigned Petitioner(s) who on oath state(s) that the facts set forth in the foregoing petition are true.

Sworn to and subscribed before  
me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_

Printed Name

\_\_\_\_\_  
NOTARY/CLERK OF PROBATE COURT  
My Commission Expires \_\_\_\_\_

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Sworn to and subscribed before  
me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_

Printed Name

\_\_\_\_\_  
NOTARY/CLERK OF PROBATE COURT  
My Commission Expires \_\_\_\_\_

**ASSETS, INCOME, OTHER SOURCES OF FUNDS OF WARD**

WARD: \_\_\_\_\_

**REAL PROPERTY**

**(Indicate if property is jointly owned and with whom)**

	Description	County	State	Approximate equity
Parcel 1	_____	_____	_____	\$ _____
Parcel 2	_____	_____	_____	\$ _____
Parcel 3	_____	_____	_____	\$ _____

**INCOME FROM ALL SOURCES**

	Yearly Total
Social Security per year	\$ _____
SSI (Supplemental Security Income) per year	\$ _____
Retirement benefits per year	\$ _____
VA benefits per year	\$ _____
Other income per year, including, e.g., alimony, annuity, or trust distributions	\$ _____
Interest, dividend, or investment income	\$ _____
<b>YEARLY TOTAL OF ALL INCOME</b>	<b>\$ _____</b>

**PERSONAL AND INTANGIBLE PROPERTY**

**(Indicate if property is jointly owned and with whom)**

**Approximate Current Value**

1. Checking/Savings/Money Market/Certificates of Deposit/Liquid Accounts:

Bank/Financial Institution/Broker	Acct. No.	Joint Owner (if any)	
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

2. Stocks/Bonds/Investments (including retirement and profit-sharing accounts):

a. held by brokers:

Brokerage Firm or Institution	Acct. No.	Joint Owner (if any)	
_____			\$ _____
_____			\$ _____
_____			\$ _____
_____			\$ _____
_____			\$ _____

b. privately held:

Company/Issuer	No. of Shares	Joint Owner (if any)	
_____			\$ _____
_____			\$ _____
_____			\$ _____

3. Automobiles:

Year/Make/Model	V.I.N.	Joint owner (if any)	
_____			\$ _____
_____			\$ _____

4. Other assets of significant value:

Description	Joint owner (if any)	
_____		\$ _____
_____		\$ _____
_____		\$ _____
<b>TOTAL VALUE OF PERSONAL AND INTANGIBLE PROPERTY</b>		<b>\$ _____</b>

**ACKNOWLEDGMENT OF SERVICE**

IN RE: Estate of \_\_\_\_\_

ESTATE NO. \_\_\_\_\_

Due and legal service of the Petition for Receipt and Acceptance of Foreign Guardianship is hereby acknowledged by the following interested persons as shown in paragraphs 5, 6, 7, and 8. The undersigned acknowledges that he/she has received a copy of the Petition and all further service and notice is waived.

SIGNATURE(S)

Sworn to and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

\_\_\_\_\_  
NOTARY/CLERK OF PROBATE COURT  
My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Printed Name

Sworn to and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

\_\_\_\_\_  
NOTARY/CLERK OF PROBATE COURT  
My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Printed Name

Sworn to and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

\_\_\_\_\_  
NOTARY/CLERK OF PROBATE COURT  
My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Printed Name

Sworn to and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

\_\_\_\_\_  
NOTARY/CLERK OF PROBATE COURT  
My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Printed Name

Sworn to and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

\_\_\_\_\_  
NOTARY/CLERK OF PROBATE COURT  
My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Printed Name