



REGISTER OF WILLS  
NORTHAMPTON COUNTY COURTHOUSE  
669 WASHINGTON STREET  
EASTON, PENNSYLVANIA 18042

FILE # \_\_\_\_\_

**RENUNCIATION**

Estate of \_\_\_\_\_, Deceased A/K/A \_\_\_\_\_

**THE REGISTER OF WILLS REQUIRES NOTARIZED FORM ALONG WITH SIGNATOR'S COPY OF ID (DL/PASSPORT).**

I, \_\_\_\_\_, \_\_\_\_\_ of the above Decedent,  
(Name of Person renouncing) (relationship / capacity)  
hereby renounce the right to administer the Estate of the Decedent and respectfully  
request that Letters be issued to \_\_\_\_\_  
(NAME OF THE PERSON SEEKING TO BE APPOINTED ADMINISTRATOR / EXECUTOR)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Street Address

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

**Executed in Register's Office**

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

(Seal)

\_\_\_\_\_  
Register of Wills / Deputy

Initials of person administering oath \_\_\_\_\_ (In office)

**Executed out of Register's Office**

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

(Seal)

\_\_\_\_\_  
Notary Public, Commission Expires

Signature and Seal of Notary or other official qualified  
to administer oaths.