

Waiver of Right to Hearing

CONNECTICUT PROBATE COURTS

Re: Account

PC-245 REV. 1/14

RECEIVED:



- Instructions:**
- 1) A party may use this form to waive the right to a hearing on the account identified below and to request that the court approve the account. The party should sign this form only if he or she has received a copy of the account. The signed form should be returned to the fiduciary.
 - 2) Type or print the form in ink.
 - 3) The fiduciary shall submit the completed form to the Probate Court with the account.

Probate Court Name

District Number

Estate of

Type Decedent's Estate Trust Conservatorship Guardianship of Minor Other (specify) _____

Final Account Interim Account for the following period:

By signing below, I represent that I:

- have received a copy of the account;
- understand the account and have no objection to any item shown on the account;
- realize that I could request a hearing on the account, but waive my right to a hearing;
- acknowledge my right to consult with legal counsel; and
- request the court approve the account.

Signature _____ Date _____

Signature _____ Date _____

Type or Print Name _____

Type or Print Name _____

Signature _____ Date _____

Signature _____ Date _____

Type or Print Name _____

Type or Print Name _____

Signature _____ Date _____

Signature _____ Date _____

Type or Print Name _____

Type or Print Name _____