

COUNTY OF \_\_\_\_\_

\_\_\_\_\_ JUDICIAL CIRCUIT

<p>In the Matter of the:</p> <p><input type="checkbox"/> Guardianship; <input type="checkbox"/> Conservatorship; <b>or</b></p> <p><input type="checkbox"/> Guardianship <b>&amp;</b> Conservatorship</p> <p>Of: _____</p> <p><input type="checkbox"/> A Minor <b>or</b> <input type="checkbox"/> A Protected Person</p>	<p>FILE(S) NO: _____</p> <p style="text-align: center;"><b>Petition to Terminate Conservatorship on Death</b></p>
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I, \_\_\_\_\_, Conservator for the above-named Individual, being duly sworn upon oath, state and affirm the following:

I was appointed conservator of the above-names Individual on \_\_\_\_\_ (month), \_\_\_\_\_ (day), \_\_\_\_\_ (year).

This conservatorship has since terminated when the Individual dies at \_\_\_\_\_ (time), on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, pursuant to SDCL 29A-5-507.

Attached to this Petition is a Certified Copy of the Death Certificate as proof of death, pursuant to SDCL 29A-1-107(2).

If not waived by the Court, a Conservator’s Final Accounting is attached per SDCL 29A-5-408(4), along with the notice to the parties regarding written objections, pursuant to SDCL 29A-5-408.

I request the Court enter an Order Terminating the Conservatorship and Order Accepting the Final Accounting (if applicable, and that Letters of Conservatorship be revoked (and any bond released).

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Sworn/affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk of Court

If Notary, my commission expires: \_\_\_\_\_

(SEAL)

\_\_\_\_\_  
Person’s Signature

Name (Print): \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Co-Conservator’s Signature (if any)