

This Instrument prepared by:

**AFFIDAVIT AS TO HEIRS  
(Pursuant to T.C.A. §30-2-712)**

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

On this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, before me personally appeared \_\_\_\_\_, to me personally known, who being by me duly sworn, on oath did say that Affiant is over eighteen (18) years of age, resides at \_\_\_\_\_ and is familiar with the family history of \_\_\_\_\_, deceased, who was the owner of the following property:

And that said decedent died on the \_\_\_ day of \_\_\_\_\_, 20 \_\_\_, and that the place of residence and homestead, at the time of death, was as follows:

And Affiant further states that said deceased left surviving the following persons, as heirs or persons otherwise interested in the estate,

- |    |    | <u>NAME</u>                           | <u>ADDRESS</u> |
|----|----|---------------------------------------|----------------|
| 1. | a. | Surviving Spouse                      |                |
|    | b. | Children                              |                |
|    | c. | Children of deceased children         |                |
|    | d. | Adopted children                      |                |
|    | e. | Children of deceased adopted children |                |

**(if none above, go to 2)**

2. Parent(s)

**(if none above, go to 3)**

3. a. Brother(s)/sister(s)

- b. Children of deceased brother(s)/sister(s)

**(if none above, go to 4)**

- 4. a. Paternal grandparent(s)
- b. Children of deceased paternal grandparent(s)  
i.e. aunt(s)/uncle(s)
- c. Children of deceased paternal aunt(s)/uncle(s)  
i.e. cousins
- d. Maternal grandparent(s)
- e. Children of deceased maternal grandparent(s)  
i.e. aunt(s)/uncle(s)
- f. Children of deceased maternal aunt(s)/uncle(s)  
i.e. cousins

And Affiant further states that said decedent left no other children or adopted children or descendants of deceased children or adopted children.

And that all of the above parties are over the age of eighteen years, except the following:

Names of minors:

And said deceased \_ left a will / \_ did not leave a will.

And that the debts against said estate \_ have been paid / \_ have not been paid.

\_\_\_\_\_

Signature

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

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

\_\_\_\_\_

Notary Public

My Commission Expires: \_\_\_\_\_