

HEIR ADVANCE COMPANY, INC.

HEIR APPLICATION

Phone: (800) 775-8044

Fax: (949) 249-2239

PERSONAL INFORMATION

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Work Phone: () _____ Cell Phone: () _____ Home Phone () _____

Email: _____ Date of Birth: ___/___/___ Social Security Number: _____

Driver's License No. _____ State of Issue: _____ Expiration Date ___/___/___

ESTATE INFORMATION

Decedent's Name: _____ Date of Birth: ___/___/___ Relation to Decedent: _____

_____% of inheritance you expect and amount \$ _____ Did the deceased leave a will, trust or neither? _____

State where probate was filed _____ County of probate case _____ Probate Case No. _____

Who is in charge of the Estate (Executor/ Administrator)? _____ Phone: () _____

Who is the Estate Attorney? _____ Phone: () _____ Fax Phone: () _____

DOCUMENTS

Please send copies of the following documents to HAC:

- Driver's License/ State ID Social Security Card
- Will Petition for Probate Inventory and Appraisal
- Death Certificate Documents for any loan or assignment previously made against your inheritance
- Real Estate Listing Agreement Proof of Insurance Title report or appraisal

PRIOR LOAN INFORMATION/ JUDGMENT INFORMATION

Have you borrowed against or assigned any portion of you inheritance? Yes / No If yes, how much? _____

Do you owe any child support? Yes / No Do you have any outstanding judgments? Yes / No

Do you owe any alimony? Yes / No Do you have any tax liens? Yes / No

The amount of money I would like HAC to advance me. \$ _____

Reason for my advance: _____

AUTHORIZATION TO RELEASE INFORMATION

I/we have applied to Heir Advance Company, Inc. for financial Assistance. Heir Advance Company, Inc. is hereby authorized to obtain information in relation to decedent's debts in order to determine if there are sufficient funds in considering an advance. I/we authorize any party to release to Heir Advance Company, Inc. any requested credit or financial information about me/us, which may include savings and/or investment account balances, checking account balances, retirement account balances, consumer credit balances, and payment histories, including mortgage payment records and balances.

A photographic or carbon copy of this authorization (being a photographic or carbon copy of the signature(s) or the undersigned) may be deemed to be the equivalent of the original and may be used as a duplicate original.

Signature: _____ Date: ___/___/20___

AUTHORIZATION FOR RELEASE OF DOCUMENTS

Authorization to Estate Attorney:

**Authorization to Personal Representative:
(a/k/a/ Executor, Administrator, etc.)**

To: _____

To: _____

Address: _____

Address: _____

City: _____

City: _____

State: _____

Zip: _____

State: _____

Zip: _____

Phone: () _____

Phone: () _____

Email: () _____

Email: () _____

Re: Estate of _____

I have applied for an advance against a portion of my expected beneficial interest in the above estate from Heir Advance Company, Inc. (HAC), prior to a distribution from the estate.

Please forward the following documents to HAC to complete my transaction:
(Crossed off documents have already been submitted to HAC)

- | | |
|--|---|
| <input type="checkbox"/> Will | <input type="checkbox"/> Petition for Probate |
| <input type="checkbox"/> Letters of Appointment | <input type="checkbox"/> Death Certificate |
| <input type="checkbox"/> Inventory and Appraisal | |
| <input type="checkbox"/> Real Estate Listing Agreement | <input type="checkbox"/> Sales Contract for Real Estate |
| <input type="checkbox"/> Proof of Insurance | <input type="checkbox"/> Title Report or Appraisal |

You may expect a call, email or letter from HAC or one of its attorneys as a part of their due diligence process. I would appreciate your cooperation with HAC and request that you make available to them any information about the estate and my expected inheritance that they may request.

Signature: _____ Date: ____/____/ 20____

Your Name (printed) _____

Your Address: _____

City: _____

State: _____

Zip: _____