

MICHIGAN HOMES FOR VETERANS
BOARD MANUAL

BOARD OF MANAGERS OPERATING POLICIES AND PROCEDURES

BP-022

Estates of Deceased Members Having a Zero Maintenance Balance

Reviewed 11/19/14

PURPOSE: The purpose of this policy is to provide guidelines regarding estates of deceased members of the Homes.

PROCEDURE:

- I. The Homes will not pursue claims for the balance of a deceased member's estate when there is no per diem cost of care balance due the Home.
- II. Where the deceased member has a per diem cost of care balance due, the Homes will use the following guidelines: The responsible party is notified of the per diem cost of care balance due and is instructed to apply the remainder of the estate, after burial expenses, toward the cost of care balance. If the estate is probated, the Home will submit a petition and order for assignment to the Probate Court.
- III. The Homes will distribute assets of deceased members as follows:
 - A. Estates in excess of \$15,000. Where the estate is in excess of \$15,000, after the adjustment required by § 1210 of the Estates and Protected Individuals Code (EPIC), MCL 700.1210, the Home will only release the funds pursuant to a probate court order issued in accordance with the EPIC.
 - B. Estates of \$15,000 or less. Where the estate is less than \$15,000, after the adjustment required by § 1210 of the EPIC, the Home will follow the procedures contained in § 3983 of the EPIC MCL 700.3983. Attachment A will be used.
 - C. Estates of \$500.00 or less. Where the Home holds \$500.00 or less and wearing apparel of the decedent, the Home may deliver such personal property as provided in § 3981 of the EPIC MCL 700.3981. Attachment B will be used.

Attachments: (2)

- A. Affidavit of Decedent's Successor for Delivery of Certain Assets Owned by Decedent
- B. Affidavit of Decedent's Spouse, Child, or Parent for Delivery of Cash Not Exceeding \$500.00 and Decedent's Wearing Apparel.

Approved, SCAO

**AFFIDAVIT OF DECEDENT'S SUCCESSOR
FOR DELIVERY OF CERTAIN ASSETS OWNED BY DECEDENT**

Estate of _____

1. I am decedent's successor as surviving spouse adult child other heir _____
specify

devisee under the will dated _____.

fiduciary or representative of _____ who is an heir or devisee and has a legal incapacity.
Name

2. Decedent died a resident of _____ on _____
City, township, or village and county and state Date

More than 28 days have passed since decedent's death.

3. No real property is included in the estate.

4. Decedent's estate, less liens and encumbrances, does not exceed \$15,000 (as adjusted for cost of living as provided in MCL 700.1210).

5. An application/petition for the appointment of a personal representative is not pending or has not been granted in any jurisdiction. A petition for assignment of an estate not exceeding \$15,000 (as adjusted for cost of living) has not been filed with a court.

6. I am entitled to payment or delivery of the following property: _____.

7. The name and address of each other person entitled to a share of the property and his/her proportion is as follows:

NAME	ADDRESS	RELATIONSHIP	SHARE %

8. A copy of the death certificate is attached.

Signature

Name (type or print)

Address

City, state, zip

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____

Notary public, State of Michigan, County of _____

NOTICE: A false statement on this affidavit may subject the person swearing to the statement to prosecution for perjury.

MCL 700.3983

**AFFIDAVIT OF DECEDENT'S SPOUSE, CHILD, OR PARENT
FOR DELIVERY OF CASH NOT EXCEEDING \$500.00 AND
DECEDENTS WEARING APPAREL**

Name of Deceased Member: _____

I, _____, am the surviving _____ of the
(spouse, child, or parent)
deceased member whose name appears above, and I request delivery of cash not exceeding \$500.00 and
wearing apparel of the deceased member pursuant to section 3981 of the Estates and Protected Individuals
Code, MCL 700.3981.

There is no application or petition pending in any probate court for administration of the deceased
member's estate.

I understand that the State of Michigan, Department of Military and Veterans Affairs, Michigan
Homes for Veterans and the Board of Managers for the Michigan Homes for Veterans, and their agents and
employees, are released from liability for delivery of personal property pursuant to this request to the same
extent as if the delivery were made to a legally qualified personal representative of the deceased member's
estate and is not required to see to the property's disposition.

I further understand that I am answerable for the property released pursuant to this request to a
person with a prior right and accountable to a personal representative of the deceased member's estate
appointed after delivery pursuant to this request.

**NOTICE: A false statement on this affidavit may subject the person swearing to the
statement to prosecution for perjury.**

Signature

Name (type or print)

Address

City, state, zip

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____