

# STATE OF MAINE

PROBATE COURT

\_\_\_\_\_  
Location of Court

\_\_\_\_\_, COUNTY DOCKET NO. \_\_\_\_\_

Estate of \_\_\_\_\_  
Protected Person

ACCEPTANCE OF APPOINTMENT  
AS CONSERVATOR<sup>1</sup>

Having been or having petitioned or been nominated to be appointed by this court, the undersigned accepts, for himself or for the institution he represents, appointment as conservator of the above named estate and submits personally to the jurisdiction of this court in any proceeding related to the estate that may be instituted by any interested person.

Notice of any such proceeding may be delivered or mailed to me by ordinary mail at my address given below or at such other address as I may hereafter file with this court.

I am familiar with the duties of a conservator as set out in Article 5, part 4 of the Probate Code (18-A MRSA §§ 5-401 et seq.). I know that I have fiduciary responsibilities as set out in 18-A MRSA § 7-302. I know that I must prepare and file an inventory within 90 days and that I must account for my services and the property in my care as the court may direct. I realize that I may be PERSONALLY LIABLE for losses in some circumstances. Knowing these things, I freely accept this duty and responsibility. I consider this appointment to be in the best interest of the protected person.

Address for court records

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Conservator

By \_\_\_\_\_

Its \_\_\_\_\_

(Use second two lines if conservator is an institution or corporation.)

<sup>1</sup>See 18-A MRSA § 5413.

Name, address and telephone number of attorney for conservator, if any.

MARP