



Probate Court Bond Request Form

Type of Bond ☐ Personal Representative ☐ Conservator

This is a re-fillable pdf document. The form can be re-used each time you need a bond. To request a bond:

1. Complete the information that is relevant to the bond you are requesting.
2. Save the form, and attach it to your email, sending it to bonds@arcwinsurance.com or fax it to 727-544-8842

Please rush my bond request: ☐ Yes ☐ No I need the bond by: _____

Requestor Name: _____ Attorney Name: _____

Electronically Send Bond to Email Address: _____

Firm Name: _____

Phone: _____ Fax: _____

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

Bond Amount: \$ _____ County: _____ Ct. File # _____

Legal Name of Deceased: _____ Date of Death: _____

Name of Personal Representative/Conservator:

_____ Social Security #: _____

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

Name of Co-Personal Representative/Conservator:

_____ Social Security #: _____

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

Estimated Estate Assets: \$ _____

☐ Yes* ☐ No

Will any business of the estate be continued by Fiduciary?

☐ Yes** ☐ No

Is Personal Representative indebted to estate?

☐ Yes ☐ No

Did Decedent execute a Last Will & Testament?

☐ Yes ☐ No

Does Personal Representative replace a prior Fiduciary

☐ Yes ☐ No

Is this an additional bond?

☐ Yes ☐ No

Does this bond replace a prior bond?

☐ Yes ☐ No

Is this bond required on the demand of an interested person?

☐ Yes ☐ No

(If YES, Whom: _____)

*Attach Copy of Court Order

**Attach a copy if bond exceeds \$1 Million

Additional Info: _____

- With email, send ALL documents to bonds@arcwinsurance.com
- Please attach any requested items above to your email or fax as necessary

Send Bond Invoice to: Name: _____ Email Address: _____

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