

Date: _____

Probate Court Investigator's Office	-	BB Brannan
Brazoria County West Annex	-	Guardianship Investigator
451 N. Velasco, Suite 143	-	979-864-1252 - phone
Angleton, TX 77515	-	979-864-1787 - fax

Dear Sir/Madam:

I request the Court to investigate the need for a guardian for the following person:

Name: _____

Address: _____

Phone No.: _____

Social Security No.: _____ DOB: _____

This person is: _____ living in a private residence
_____ a client at a nursing facility
_____ a patient in a hospital

This person is: _____ my friend
_____ my relative (Relationship: _____)
_____ my client. Please list your and your employer's name & title:

This person has the following relatives: (please place an asterisk by the person who has expressed a willingness to be appointed as guardian, and list his/her SSN)

Spouse: _____

Address and Phone: _____

Children: _____

Address(es) and Phone(s): _____

Siblings: _____

Address(es) and Phone(s): _____

Next of Kin: _____

Address(es) and Phone(s): _____

Friends: _____

Address(es) and Phone(s): _____

This person does / does not have a guardian in Texas.

This person is / is not a resident of Brazoria County. (If not, is the person located in Brazoria County? _____)

The person has / has not executed a Power of Attorney. (If so, to whom? _____)

The nature and degree of the person's incapacity is as follows: _____

I am aware of the following facts that indicate that the person needs a guardian:

The person has the following assets and income:

Home /

Value: _____

Bank Accounts /

Value: _____

Stocks & Bonds /

Value: _____

Other Assets /

Value: _____

Monthly Income /

Source: _____

Is the person in imminent danger of serious impairment to his / her physical health or safety unless immediate action is taken? Yes / No If yes, explain: _____

Is the person in imminent danger of having his / her estate seriously damaged or dissipated unless immediate action is taken? Yes / No If yes, explain: _____

I hereby swear that this information is true and correct to the best of my knowledge.

Signed,

Name: _____

Address: _____

Phone No.: _____