

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

IN THE MATTER OF

Amended

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

**Application to**  
 **Authorize**  
 **Confirm**  
**Sale/Mortgage/Lease of Real Estate**  
**of Ward under Guardianship**  
**(Minor and Adult Guardianship)**

Case No. \_\_\_\_\_

**UNDER OATH, I STATE:**

- 1. I am the
  - guardian of the estate.
  - relative of the ward.
  - person acting on behalf of the guardian of the estate or relative. Explain: \_\_\_\_\_

- 2. I ask the court to
  - A. authorize the guardian of the estate to  sell  mortgage  lease
  - B. approve and confirm the pending agreement for the  sale  mortgage  lease
 of the real estate of the ward located in \_\_\_\_\_ County,  
 State of \_\_\_\_\_, and described as follows: [Legal description]  **See attached**

- 3. A copy of any contract, offer, or agreement concerning this transaction
  - is attached.
  - will be filed prior to any hearing.

4. This transaction is not contrary to any Will or conveyance by which the ward received this interest in real estate.

- 5. The grounds for this request are
  - A. the personal property and the income of the real estate of the ward are together insufficient for the payment of the ward's debts or for the maintenance and education of the ward or the ward's family.
  - B. the interests of the ward require or will be substantially promoted by such disposition on account of such real estate or interest therein being exposed to waste or dilapidation, or being unproductive, or for other peculiar reasons or circumstances.

I request that the court review this Application and take action as appropriate.

State of \_\_\_\_\_  
County of \_\_\_\_\_  
Subscribed and sworn to before me on \_\_\_\_\_

Notary Public/Court Official

Name Printed or Typed

My commission/term expires: \_\_\_\_\_

This notarial act involved the use of communication technology.

▶ \_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Name Printed or Typed

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
State Bar No. (if any)