

Utah Uniform Probate Code Forms

UUPC Form 57 - Determination of Heirs (U.C.A. § 75-3-107(2))

2013 SEP 20 PM 4:16

None  
 Attorney's Name and Utah Bar No.  
Valinda A. Jackson  
 Firm Name  
1271 E 1250 So.  
 Address  
Clearfield, Utah 84015  
 City State ZIP  
801-776-0517  
 Telephone

Entry No. 336021 ORDER  
 05/05/2014 12:56:54 PM B: 1229 P: 1832 Pages: 6  
 FEE \$20.00 BY VALINDA JACKSON  
 Chad Montgomery, Box Elder County Recorder



IN THE 1<sup>st</sup> JUDICIAL DISTRICT COURT OF Box Elder COUNTY  
 STATE OF UTAH

IN THE MATTER OF THE ESTATE OF  
Alice Viola Whitaker  
 Deceased.

DETERMINATION OF HEIRS

Probate No. 133100083

On this 12 day of Nov., 2013, came on to be heard the  
 Petition of Valinda A. Jackson for an Order determining the  
 heirs of Alice Viola Whitaker, deceased, and the Court, having  
 considered such Petition and having heard in open court the evidence pertaining to such Petition,

NOW, THEREFORE, IT IS HEREBY ORDERED AND DECREED THAT:

1. The Court has jurisdiction of this estate, proceeding and subject matter.
2. The time required for notice has expired.
3. All required notices have been given or waived.
4. Alice Viola Whitaker died on January 28, 1983 in Ogden, Utah (Exhibit "A")
5. Venue is proper because at the time of death the decedent was domiciled in Box Elder County, Utah and owned property in this County
6. The decedent's estate was never probated and cannot now be probated because more than three (3) years have passed since the decedent's death (U.C.A. §75-3-107).

Valinda A. Jackson  
801-776-0517

Utah Probate System

Estate of  
Alice Viola Whitaker

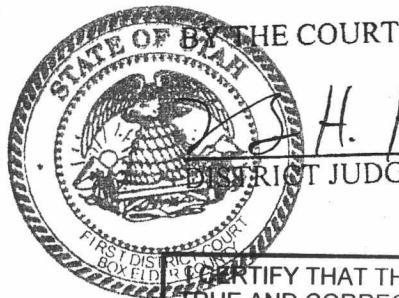
- 7. The names and addresses of the living heirs of the decedent, and the ages of those who are minors are as follows: (See attached list, Exhibit "B".)

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>ADDRESS</u>	<u>AGE-IF MINOR</u>
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- 8. At the time of the decedent's death, the decedent owned an interest in the following described property, located in Box Elder County, Utah:  
House and Property at 420 E 500 So, Brigham City, Utah. (See attached Legal Description, Exhibit "C".)

- 9. At the time of the decedent's death, distribution of his estate was governed by the provisions of Utah Code Annotated § 75-3-107 which provides as follows: (See attached Probate Code, Exhibit "D".)

DATED: 11/12/13



THE COURT

DISTRICT JUDGE

CERTIFY THAT THIS DOCUMENT IS A TRUE AND CORRECT COPY OF THE ORIGINAL FILED IN THE FIRST DISTRICT COURT, STATE OF UTAH, JUVENILE OR DISTRICT COURT.

6 pages Date: 11/12/13

[Signature]  
Office of the Court



This form is classified as PRIVATE under the Utah Information Practices Act.

29-0079-SS

CERTIFICATE OF DEATH  
STATE OF UTAH - DEPARTMENT OF HEALTH

STATE FILE NUMBER

DECEDENT PERSONAL DATA	NAME OF DECEDENT FIRST MIDDLE LAST 1. Alice Viola Johnson WHITAKER			SEX 2. Female	RACE (White, Black, Am. Indian, etc.) 3. White	DATE OF DEATH (Month, Day, Year) 4. January 28, 1983	
	WAS DECEDENT OF SPANISH ORIGIN? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If yes, indicate type: Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other <input type="checkbox"/> (If other, specify)			DATE OF BIRTH (Month, Day, Year) 5. February 27, 1917	AGE (Last Birthday) 6. 65 Yrs.	IF UNDER 1 year 7. Months Days	
	BIRTHPLACE (State or foreign country) 8. Utah		CITIZEN of what country 9. U.S.A.	Married <input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input checked="" type="checkbox"/>	EDUCATION—(Specify only highest grade completed) 10. 10 Elementary or Secondary (0-12) College (13-16 or 17+)	SOCIAL SECURITY NUMBER 11. 529-18-1916	
	USUAL OCCUPATION (Give kind of work done during most of working life, even if retired.) 12a. Homemaker		KIND OF BUSINESS OR INDUSTRY 12b. Own Home		NAME of surviving spouse (if, wife, enter maiden name.) 14.		
USUAL RESIDENCE	NAME OF FATHER 15. Nels Thomas Johnson			MAIDEN NAME OF MOTHER 16. Emily Elnora Swenson		Was decedent ever in U.S. Armed Forces? 17. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
	USUAL RESIDENCE—(Street address or location) 18a. 420 East 500 South			INSIDE CITY LIMITS? 18b. YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	NAME, RELATIONSHIP AND MAILING ADDRESS OF INFORMANT 19. Vern E. Whitaker (Son) 3562 West 5500 South Roy, Utah 84067		
	CITY OR TOWN 18c. Brigham City	COUNTY 18d. Box Elder	STATE AND ZIP CODE 18e. Utah 84302				
PLACE OF DEATH	NAME of hospital, nursing home or other institution where death occurred. (If outside an institution, give street address or location.) 20a. McKay-Dee Hospital			<input checked="" type="checkbox"/> Inpatient <input type="checkbox"/> E.D. patient <input type="checkbox"/> DOA	CITY OR TOWN 20b. Ogden	COUNTY 20c. Weber	
	MEDICAL EXAMINER OR PHYSICIAN'S CERTIFICATION	MEDICAL EXAMINER: I hereby certify that to the best of my knowledge the death occurred at the hour, date and place stated above from the causes stated below based on examination of the body and/or investigation of the circumstances. 21a. Decedent was pronounced dead at: HOUR: DATE: 21b. V. L. Hansen			PHYSICIAN OR MEDICAL EXAMINER SIGNATURE 21c. 1910		TIME of death (24 hr. clock)
PHYSICIAN: I hereby certify that to the best of my knowledge the death occurred at the hour, date and place stated above from the causes stated below, that I attended the decedent, and I last saw the decedent alive on: 21d. month Jan. day 28 year 1983			CERTIFIER'S name and title (Type or print) 21e. Vincent L. Hansen, M.D.		DATE SIGNED (Month, Day, Year) 21f. Feb. 1, 1983		
If not certified by medical examiner, was death reported to him? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If yes, enter the date and hour reported: (24 hour clock)			CERTIFIER'S address and zip code 21g. 4650 Harrison Blvd., Ogden, Utah		UTAH PHYSICIAN LICENSE NUMBER 21h. 4781		
22. HOUR: MO. DAY YEAR			SIGNATURE of Funeral Director 24. Richard Myers		FUNERAL HOME—Name, address and license number 25. Olsen Funeral Home, Brigham City, Ut		
FUNERAL DIRECTOR AND LOCAL REGISTRAR	Burial <input checked="" type="checkbox"/> Entombment <input type="checkbox"/> Removal <input type="checkbox"/> Cremation <input type="checkbox"/> Other <input type="checkbox"/>			DATE 23a. Feb. 1, 1983			
	NAME AND LOCATION OF CEMETERY OR CREMATORY 26. Brigham City Cemetery, Brigham City, Ut			LOCAL REGISTRAR—Signature 27. E. Mark Nichols, M.D.		Date accepted for registration by local registrar 28. February 1, 1983	
CAUSE OF DEATH	PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE: (A) Anaplastic Carcinoma of Lung DUE TO, OR AS A CONSEQUENCE OF (B) DUE TO, OR AS A CONSEQUENCE OF (C)			Interval between onset and death 1 mo.		Interval between onset and death	
	CONDITIONS IF ANY WHICH GAVE RISE TO THE IMMEDIATE CAUSE (A), STATING THE UNDERLYING CAUSE LAST.					Interval between onset and death	
	PART II. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH, BUT NOT RELATED TO THE IMMEDIATE CAUSE GIVEN IN PART I.					Interval between onset and death	
INJURY INFORMATION	29.			AUTOPSY 31a. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	IF YES, were findings considered in determining cause of death? 31b. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
	Accident <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Undetermined if Injured <input type="checkbox"/> Homicide <input type="checkbox"/> Accidentally or Purposely <input type="checkbox"/>			DATE of Injury (Month, Day, Year) 32a.	TIME OF INJURY (24 Hour Clock) 32b.	INJURY AT WORK? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
	LOCATION OF INJURY—STREET AND NUMBER OR LOCATION AND CITY OR TOWN. 36a.			Distance from place of injury to usual residence (Item 18) 36b. Miles	Were laboratory tests done for drugs or toxic chemicals? 37. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Were laboratory tests done for alcohol? 38. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
	DESCRIBE HOW INJURY OCCURRED (enter sequence of events which resulted in injury, NATURE OF INJURY SHOULD BE ENTERED IN ITEM 29) 39.					If motor vehicle accident, specify if decedent was driver, passenger or pedestrian. 40.	

SDH—BHS - 12 Rev. 7/81

This is to certify that this is a true copy of the certificate on file in this office. This certified copy is issued under authority of section 26-2-22 of the Utah Code Annotated, 1953 As Amended.

Date Issued: SEP 23 1994

County

WEBER

Registrar

*Craig Heninger*

*John E Brockert*

John E. Brockert  
DIRECTOR OF VITAL STATISTICS

By *SS*



LL 308925

VaLinda A. Jackson

801-776-0517 Order Determining Heirs of Alice Viola Whitaker

## 1. E. Norene Spencer (deceased)

Surviving Children:

Janet Lynn Conatser  
Leslie Trailer Park  
671 W. 4400 S. #52  
Riverdale, UT 84405

Fred Spencer  
1361 N. 1500 W.  
Clinton, UT 84015

Jubal Spencer  
5773 S. 4025 W.  
Roy, UT 84067

2. Nadine A. Chavez  
3401 Camellia Dr. #713  
Temple, TX 765023. Vern E. Whitaker (deceased)  
Tamra L. Emrich (deceased child)  
Teresa M. Whitaker (deceased child)Surviving Spouse:

Linda Whitaker  
3562 W. 5500 S.  
Roy, UT 84067

4. LaVerle M. Andersen  
653 S. 300 E.  
Brigham City, UT 843025. VaLinda A. Jackson  
1271 E. 1250 S.  
Clearfield, UT 84015

## 6. Robert J. Whitaker (deceased)

Exhibit "C"  
Estate of  
Alice Viola Whitaker

(Copy)

Box Elder County Treasurer

801-776-0517

Shaun Thornley

Account	Parcel Number	Receipt Date	Receipt Number
R0014746	031390018	Oct 23, 2012	2012-10-23-TB-13765

WHITAKER ALICE VIOLA  
420 E 500 S  
BRIGHAM CITY, UT 84302-2933

Paid  
Box Elder County  
Treasurer

Situs Address  
420 E 500 S

Payor  
WHITAKER ALICE VIOLA  
420 E 500 S  
BRIGHAM CITY, UT 84302-2933

Legal Description

BEG AT A PT 114 FT E OF THE NW COR OF LOT 6, BLK 26, PLAT B, B.C.S, S 5 RDS 14.25 FT, E 67 FT, N 5 RDS 14.25 FT, W 67 FT TOA BEG. CONT. 0.14 AC.

Payments Received

Check	\$183.16
Check # 027060769 - Am First Cashier's Ck	
Paid By Robert Whitaker	

Payments Applied

Year	Charges	Billed	Prior Payments	New Payments	Balance
2012	Tax	\$183.16	\$0.00	\$183.16	\$0.00
				<u>\$183.16</u>	<u>\$0.00</u>
			Balance Due as of Oct 23, 2012		\$0.00

Title 75 Utah Uniform Probate Code

Chapter 3 Probate of Wills and Administration

Section 107 Probate, testacy, and appointment proceedings -- Ultimate time limit -- Presumption and order of intestacy.

75-3-107. Probate, testacy, and appointment proceedings -- Ultimate time limit -- Presumption and order of intestacy.

(1) No informal probate proceeding or formal testacy proceeding, other than a proceeding to probate a will previously probated at the testator's domicile and appointment proceedings relating to an estate in which there has been a prior appointment, may be commenced more than three years after the decedent's death, except:

(a) If a previous proceeding was dismissed because of doubt about the fact of the decedent's death, appropriate probate, appointment, or testacy proceedings may be maintained at any time thereafter upon a finding that the decedent's death occurred prior to the initiation of the previous proceeding and the applicant or petitioner has not delayed unduly in initiating the subsequent proceeding.

(b) Appropriate probate, appointment, or testacy proceedings may be maintained in relation to the estate of an absent, disappeared, or missing person for whose estate a conservator has been appointed, at any time within three years after the conservator becomes able to establish the death of the protected person.

(c) A proceeding to contest an informally probated will and to secure appointment of the person with legal priority for appointment in the event the contest is successful, may be commenced within the later of 12 months from the informal probate or three years from the decedent's death.

(2) The limitations provided in Subsection (1) do not apply to proceedings to construe probated wills or determine heirs of an intestate. In cases under Subsection (1)(a) or (b), the date on which a testacy or appointment proceeding is properly commenced shall be deemed to be the date of the decedent's death for purposes of other limitations provisions of this title which relate to the date of death.

(3) If no will is probated within three years from death, the presumption of intestacy is final and the court shall upon filing a proper petition enter an order to that effect. The court also has continuing jurisdiction to:

- (a) determine what property was owned by the decedent at the time of death; and
(b) appoint a personal representative or special administrator to administer the decedent's estate.

Amended by Chapter 364, 2013 General Session

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Who represents me?

How can we improve this page? For a personal response, please include your email address.

State Senate

350 North State, Suite 320 PO Box 145115

House of Representatives

350 North State, Suite 350 PO Box 145030

Enter address and zip code