

**THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH**

<http://www.courts.state.nh.us>

Court Name: _____

Case Name: _____

Case Number: _____
(if known)

APPOINTMENT OF RESIDENT AGENT

1. Fiduciary Name _____ Telephone _____
Mailing Address _____

2. Attorney Name _____ Telephone _____
Mailing Address _____ Bar ID# _____

3. Deceased/Ward Name _____
Residence (city or town) _____

4. Fiduciary is: Executor Administrator
 Ancillary Executor or Administrator Special Administrator
 Administrator With Will Annexed Administrator *De Bonis Non*
 Guardian Conservator Trustee

5. I hereby appoint _____ as my agent to receive notice of claims against the estate of the deceased/ward, and service of process against me as fiduciary.

Resident agent mailing address _____

Resident agent telephone number _____

Bar ID# _____ (only if applicable)

Date

Fiduciary Signature

I accept appointment as resident agent.

Date

Resident Agent Signature