

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF: )  
 )  
IN THE MATTER OF: )  
 )

IN THE PROBATE COURT

**APPLICATION FOR RESTRAINT OR PERFORMANCE OF  
PERSONAL REPRESENTATIVE**

CASE NUMBER:

Applicant: \_\_\_\_\_

1. Give your relationship to the decedent, if any, and your interest in this proceeding.
2. I request an Order of  RESTRAINT  PERFORMANCE of \_\_\_\_\_ ,  
Personal Representative in this estate, because (please set out your specific demands):

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ .

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone (O): \_\_\_\_\_

Attorney: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

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**TEMPORARY ORDER OF RESTRAINT/PERFORMANCE**

IT IS HEREBY ORDERED that the following conditions be imposed on \_\_\_\_\_, the Personal Representative in the above estate.

**RESTRICTIONS:**

**PERFORMANCE DUTIES:**

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ .

\_\_\_\_\_  
, Probate Court Judge

