

ESTATE INFORMATION SHEET  
MIDDLESEX COUNTY SURROGATE'S COURT  
P.O. Box 790, New Brunswick, NJ 08903-0790  
[surrogate@co.middlesex.nj.us](mailto:surrogate@co.middlesex.nj.us)

Name of Child: \_\_\_\_\_

Address of Child \_\_\_\_\_  
City State Zip

Date of Birth: \_\_\_\_\_ SS# \_\_\_\_\_

Name and Address of Guardian(s): \_\_\_\_\_  
\_\_\_\_\_

Telephone Number of Guardian(s): \_\_\_\_\_

<u>Birth Parents Names</u>	<u>Relationship</u>	<u>Address - City &amp; State</u>
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Please send the *social security card* and *birth certificate* of the minor along with this sheet.  
If there is an order directing the deposit of funds to be held with Middlesex County, please send  
a copy of the signed judgement with the paperwork.

Total Number of Guardianship Certificates Requested: \_\_\_\_\_

Name, Address, & Phone Number of Attorney (if being represented): \_\_\_\_\_  
\_\_\_\_\_

Tel. (732)745-3055 Fax (732)745-4125