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| FORM 11 |
| RENUNCIATION OF PROBATE OR LETTERS OF ADMINISTRATIONWITH THE WILL ANNEXED  |
| Rule 17  |
| IN THE SUPREME COURT OF TASMANIA  |
| PROBATE REGISTRY  |
|  |
| In the matter of the Estate of: | FULL NAME*[full name of deceased including, in brackets, “in the Will called…” and/or “also known as…” if the name of the deceased differs in the Will or if the deceased is known by any other name]*  |
| Date of death: | 00/00/0000 |
| Last known residential address of deceased:  | address *[full address of the deceased including, in brackets, “in the Record of Death noted as…” if the address of the deceased differs in the Record of Death]* |
| Full name of applicant:*[repeat for more applicants]* | FULL NAME *[full name of applicant including, in brackets, “in the Will called…” and/or “also known as…” if the name of the applicant differs in the Will or if the applicant is known by any other name]* |
| Address of applicant:*[repeat for more applicants]* | address |
| I, |  |
| Full name of person renouncing: | FULL NAME *[full name of person renouncing including, in brackets, “in the Will called…” and/or “also known as…” if the name of the person renouncing differs in the Will or if the person is known by any other name]* |
| Address of person renouncing: | address |
| \*make oath and say/\*do solemnly and sincerely declare and affirm: |
|  | FULL NAME *[name of deceased]* made \*his/\*her last valid Will bearing the date 00/00/0000 *[mention any Codicils and their date here].* |
|  | I am ROLE *[state if the person renouncing is an executor of the Will, trustee of the residuary estate or as the case may be]*. |
|  | FULL NAME *[name of deceased*] died at suburb in state on the 00/00/0000. |
|  | I have not intermeddled in the estate or affairs of the deceased and I will not intermeddle in the estate or affairs of the deceased in the future.  |
|  | I desire to renounce all and every right, title and interest in or to \*probate/\*letters of administration with the Will annexed and execution of the will and administration of the estate of the deceased. |
|  | I understand that I will have no involvement with the administration of the estate or affairs of the deceased in the future. |
|  | I am 18 years or older and I am of sound mind. |
|  | I do wholly and absolutely renounce my right and title to probate and execution of the \*Will/ \*letters of administration with the Will annexed and also my right to administer the estate of the deceased. |
|  | I understand that unless there are exceptional circumstances and the Court consents that I will not be able to withdraw this renunciation. |
| \*SWORN/\*AFFIRMED by | FULL NAME |
| at SUBURB OR TOWN in STATE |  |
| dated 00/00/000 | ……………………………………………………. |
| Before me: | …………………………………………………….FULL NAME\*SOLICITOR/\*JUSTICE OF THE PEACE |
| NOTES: |
| Please insert details relevant to your application where blue text appears. |
| Text with a \* next to it indicates that it is an option. You must select the applicable option/s and/or delete the \*options which are not applicable. |
| If a section of the form does not apply to your application please simply state “not applicable” next to the relevant section. |
| Guidance on completing this form is contained in [square brackets] and *italics*. Please delete the guidance which appears in square brackets and is italicized from your final draft. |
| Otherwise, please do not amend the format or content of this form. |