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| FORM 15 |
| CONSENT TO A GRANT OF LETTERS OF ADMINISTRATION ORLETTERS OF ADMINISTRATION WITH THE WILL ANNEXED |
| Rule 21  |
| IN THE SUPREME COURT OF TASMANIA  |
| PROBATE REGISTRY  |
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| 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 consenting: | FULL NAME *[full name of person consenting including, in brackets, “in the Will called…” and/or “also known as…” if the name of the person consenting differs in the Will or if the person consenting is known by any other name]* |
| Address of person consenting: | address |
| \*make oath and say/\*do solemnly and sincerely declare and affirm: |
|  | FULL NAME *[name of deceased]* died at suburb in state on the 00/00/0000 \*leaving a Will dated 00/00/0000/\*without leaving a Will.  |
|  | I am the deceased's ROLE.*[state the person consenting’s relationship with the deceased e.g. wife or as the case may be]*. |
|  | I understand that FULL NAME *[of applicant]* will be applying for \*letters of administration/\*letters of administration with the Will annexed with respect to the estate of the deceased. |
|  | I give my consent to the application for \*letters of administration/\*letters of administration with the Will annexed with respect to the estate of FULL NAME [*name of deceased*]. |
|  | I understand that I may apply for a grant of \*letters of administration/\*letters of administration with the Will annexed of the estate at some later time with the leave of the court. |
| \*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. |