

FORM 2

**NOTICE OF INTENTION TO APPLY FOR GRANT OR RESEAL OF
A GRANT**

Rule 33

IN THE SUPREME COURT OF TASMANIA
PROBATE REGISTRY

In the matter of the Estate of: AUDREY BURDEN

Date of death: 15/05/2019

Last known residential address of deceased: Regis Aged Care 8 Blenheim Street NORWOOD
7250 Tasmania

***Address in Will:** 3/12 Casino Rise PROSPECT VALE 7250 Tasmania

***Date of Will:** 20/06/2005

***Executor named in Will:** SIMON CHRISTOPHER WINDSOR BURDEN
(in the Will called Simon CW Burden)
HILARY ANN BURDEN

Full name of applicant: SIMON CHRISTOPHER WINDSOR BURDEN
(in the Will called Simon CW Burden)

Address of applicant: 28 Cimitiere Street LAUNCESTON 7250 Tasmania

Estate of: Audrey Burden
Applicant/Firm name: Simon Christopher Windsor Burden
Address: 28 Cimitiere Street
Launceston Tasmania

DX: not applicable
Tel: 0428079198
Email: skburden@bigpond.com
Practitioner not applicable

:

Australian legal practitioner acting for applicant:

not applicable

Address for service:

28 Cimitiere Street Launceston Tasmania 7250

TAKE NOTE:

After 14 days from the date of publication of this notice an application for a grant of probate of the Will dated 20/06/2005

in the aforementioned estate will be made to the Probate Registry of the Supreme Court of Tasmania.

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.