	FC	DRM 2	
ΝΟΤΙΟ	E OF INTENTION TO APP	LY FOR GRANT OR RESEAL OF	
	A GRA	NT	
	Ru	ıle 33	
IN THE SUPREME	COURT OF TASMANIA		
PROBATE REGIST	RY		
In the matter of the Estate of:		Keith William Lockwood	
Date of death:		03/04/2019	
Last known residential address of deceased:		Wellington Views 24 Stanford Drive Old Beach Tasmania 7017 [	
*Address in Will:		As above	
*Date of Will:		03/03/2019	
*Executor named in Will:		Christine Stella Glass Gregory William Lockwood	
Full name of applicant:		Christine Stella Glass	
Address of applicant:		6 Phoenix Street Howrah Tasmania 7018	
Relationship of applicant to deceased		Daughter	
Estate of: Applicant/Firm name: Address:	Full name of deceased Full name Postal address – line one Post address – line two	DX:Firm numberTel:NumberEmail:AddressPractitioner:Initials and surname	

\*Australian legal practitioner acting for applicant:

Not applicable

Address for service:

6 Phoenix Street Howrah Tasmania 7018

## TAKE NOTE:

After 14 days from the date of publication of this notice an application for a grant of:

\*probate of the Will dated 03/03/2019

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.