

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: [EUNICE MAY SCHOFIELD](#)

Date of death: [07/05/2019](#)

Last known residential address of deceased: [Unit 34/57 Cadbury Road, Claremont, Tasmania
\(in the Record of Death noted as Gardens
Nursing Home, Claremont\)](#)

Address in Will: [Unit 34/57 Cadbury Road, Claremont, Tasmania](#)

Date of Will: [04/12/2014](#)

Executor named in Will: [DAVID ALLAN SCHOFIELD](#)

Full name of applicant: [DAVID ALLAN SCHOFIELD](#)

Address of applicant: [14 Cammeray Road, Claremont, Tasmania](#)

Relationship of applicant to deceased: [Son](#)

Address for service: [14 Cammeray Road, Claremont, Tasmania 7011](#)

Estate of: [Eunice May Schofield](#)
Applicant/Firm name: [David Allan Schofield](#)
Address: [14 Cammeray Road
Claremont, Tasmania 7011](#)

DX:
Tel: [04 0812 1778](#)
Email: schof@netspace.net.au
Practitioner:

TAKE NOTE:

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

[probate of the Will dated 04/12/2014;](#)

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