

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:** Joan Francis Edgecumbe

**Date of death:** 08/11/2019

**Last known residential address of deceased:** 4 Madison Close  
Hadspen  
Tas 7290

**Full name of applicant:** Elizabeth Grace Edgecumbe

**Address of applicant:** 4 Madison Close  
Hadspen  
Tas 7290

**Relationship of applicant to deceased:** Child

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Estate of:	Joan Francis Edgecumbe	DX:	N/A
Applicant/Firm name:	Elizabeth Grace Edgecumbe	Tel:	+61466570578
Address:	4 Madison Close Hadspen Tax 7290	Email:	e.edgecumbe76@gmail.com
		Practitioner:	N/A

**TAKE NOTE:**

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

\*letters of administration on intestacy

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.

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Estate of:	Joan Francis Edgecumbe	DX:	N/A
Applicant/Firm name:	Elizabeth Grace Edgecumbe	Tel:	+61466570578
Address:	4 Madison Close Hadspen Tax 7290	Email:	e.edgecumbe76@gmail.com
		Practitioner:	N/A