

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:** LILLIAN MARY PATRICIA MENZIE

**Date of death:** 22/11/2019

**Last known residential address of deceased:** 35 Ranelagh Street, Ranelagh Tasmania 7109

**\*Address in Will:** 35 Ranelagh Street, Ranelagh Tasmania 7109

**\*Date of Will:** 13/11/2019

**\*Executor named in Will:** Angela Mary Males  
Glenn Patrick Cragg

**Full name of applicants:** Angela Mary Males  
Glenn Patrick Cragg

**Address of applicants:** Unit 2, 30 Bath Street, Battery Point, 7004  
37 Thistle Down, Huntingfield Tasmania 7052

**Relationship of applicant to deceased:** Child  
Child

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Estate of: Lillian Mary Patricia Menzie  
Applicant/Firm name: Angela Mary Males  
Address: Unit 2/30 Bath Street  
Battery Point TAS 7004

DX: Not applicable  
Tel: 0409292179  
Email: Angela.males@health.tas.gov.au  
Practitioner: Not applicable

**\*Australian legal practitioner acting for applicant:**

Not applicable

**Address for service:**

Unit 2, 30 Bath Street, Battery Point, 7004

**TAKE NOTE:**

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

\*Probate of the Will dated 13/11/2019

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.