

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:** PAULINE ELIZABETH CURE

**Date of death:** 29/07/2020

**Last known residential address of deceased:** Mary Ogilvy Home, 51 Pirie Street New Town 7008

**Address in Will:** 125/57 Cadbury Road Claremont TAS 7011

**Date of Will:** 11 April 2006

**Executor named in Will:** MAXINE FRANCES LOWRY

**Executor named in Will:** LANCE WILLIAM CURE

**Executor named in Will:** SHARON ELIZABETH CURE (in the will called SHARON ELIZABETH SHIRES)

**Executor named in Will:** HELEN LOUSIE GRAY

**Full name of applicant:** MAXINE FRANCES LOWRY

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Estate of: Pauline Elizabeth Cure  
Applicant/Firm name: Not applicable  
Address:

DX: Not applicable  
Tel: 0409976225r  
Email: maxinelowry@gmail.com  
Practitioner: Not applicable

<b>Address of applicant:</b>	9 Ryde St North Hobart TAS 7000
<b>Relationship of applicant to deceased:</b>	Child
<b>Full name of applicant:</b>	LANCE WILLIAM CURE
<b>Address of applicant:</b>	44 St Andrews Circle Prospect TAS 7250
<b>Relationship of applicant to deceased:</b>	Child
<b>Full name of applicant:</b>	SHARON ELIZABETH CURE (in the will called SHARON ELIZABETH SHIRES)
<b>Address of applicant:</b>	73 Charles Street Launceston TAS 7250
<b>Relationship of applicant to deceased:</b>	Child
<b>Full name of applicant:</b>	HELEN LOUISE GRAY
<b>Address of applicant:</b>	5 Mileta Court Geilston Bay TAS 7015
<b>Relationship of applicant to deceased:</b>	Child
<b>Australian legal practitioner acting for applicant:</b>	Not applicable
<b>Address for service:</b>	9 Ryde Street North Hobart TAS 7000

**TAKE NOTE:**

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

probate of the Will dated 11/04/2006;

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