

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:

PETER ALLAN LAUGHER

[full name of deceased including, in brackets, “in the Will called...” and/or “also known as...” if the name of the deceased differs in the Will or if the deceased is known by any other name]

Date of death:

25/11/2020

Last known residential address of deceased:

Unit 46, 3 Tallentire Road, Rocherlea, Tasmania, 7248

[full address of the deceased including, in brackets, “in the Record of Death noted as...” if the address of the deceased differs in the Record of Death]

Full name of applicant:

[repeat for more applicants]

ANNETTE MARIA LAUGHER

MICHAEL ALAN LAUGHER

[full name of applicant including, in brackets, “in the Will called...” and/or “also known as...” if the name of the applicant differs in the Will or if the applicant is known by any other name]

Address of applicant:

[repeat for more applicants]

31 Mayfield Street, Mayfield, Tasmania, 7248

189 Mary Street, Westbury, Tasmania, 7303

Relationship of applicant to deceased:

[repeat for more applicants]

CHILD – DAUGHTER

CHILD - SON

[for example: stranger in blood, widow, child]

Estate of: Full name of deceased
Applicant/Firm name: Full name
Address: Postal address – line one
Post address – line two

DX: Firm number
Tel: Number
Email: Address
Practitioner: Initials and surname

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

N/A

Address for service:

31 Mayfield Street, Mayfield, Tasmania, 7248

[this must be a street address, not a post office box and must be completed even if you are not represented by a solicitor]

TAKE NOTE:

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

***letters of administration on intestacy**

[for reseals see also form 3 and section 49 of the Administration and Probate Act 1935]

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.