

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:** MARY DAWN COFFEY

**Date of death:** 18/02/2021

**Last known residential address of deceased:** DISTRICT HEALTH SERVICES  
13 BOLTON STREET BEACONSFIELD TASMANIA

**\*Address in Will:** 13 BOLTON STREET BEACONSFIELD TASMANIA

**\*Date of Will:** 27/02/2019

**\*Executor named in Will:** ANN MARY BEEKE  
*[repeat for more executors]*

**Full name of applicant:** ANN MARY BEEKE  
*[repeat for more applicants]*

**Address of applicant:** 5 Cherry Grove Latrobe Tasmania  
*[repeat for more applicants]*

**Relationship of applicant to deceased:** Child  
*[repeat for more applicants]*

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Estate of:	MARY DAWN COFFEY	DX:	70334
Applicant/Firm name:	BEN LILLAS	Tel:	0364249111
Address:	89 OLDAKER STREET DEVONPORT PO BOX 880 DEVONPORT TAS 7310	Email:	<a href="mailto:ben@benlillas.com.au">ben@benlillas.com.au</a>
		Practitioner:	B J LILLAS

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

BEN LILLAS

**Address for service:**

89 OLDAKER STREET DEVONPORT TASMANIA

**TAKE NOTE:**

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

\*[probate of the Will dated 27/02/2019](#);

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