	FC	DRM 2	
ΝΟΤΙΟ	E OF INTENTION TO APP	LY FOR GRA	NT OR RESEAL OF
	A GRA	ANT	
	Ru	ule 33	
IN THE SUPREME	COURT OF TASMANIA		
PROBATE REGISTE	RY		
In the matter of the Estate of:		Joan Ethelyn Letchford	
Date of death:		19/01/2021	
Last known residential address of deceased:		The Manor	
		2 Guy St	
		Kings Meadow	ws 7249
*Address in Will:		Unit 2/46 Main Road	
		Morphett Val	
		In the State o	of South Australia
*Date of Will:		20/05/1996	
*Executor named in Will:		Instituted Executor:	
		Warwick The	omas Letchford (dec.)
		Substituted Ex	xecutors:
		Roderick Ron	ald Letchford
Estate of: Applicant/Firm name: Address:	Joan Ethelyn Letchford Justin Warwick Letchford 2/56 Crosby Road Rosetta 7010	DX: Tel: Email: Practitioner:	NA 0418 339 019 j <u>wletchford@gmail.com</u> NA

	Justin Warwick Letchford
	Julie Jean Burrage
Full name of applicant:	Justin Warwick Letchford
Address of applicant:	2/56 Crosby Road, Rosetta 7010
Relationship of applicant to deceased:	Son
*Australian legal practitioner acting for applicant:	N/A
Address for service:	2/56 Crosby Road, Rosetta 7010

TAKE NOTE:

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

probate of the Will dated 20/05/1996

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.