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:

JOAN ALISON COUSINS (IN THE WILL CALLED

JOAN ALLISON COUSINS)

Date of death:

12/08/2021

Last known residential address of deceased:

STRATHDEVON NURSING HOME, LATROBE IN

TASMANIA

*Address in Will:

2, 221 STANLEY STREET SOUTH, LATROBE IN

TASMANIA

*Date of Will:

31/7/2015

Executor named in Will:

AMANDA LOUISE HICKS

Executor named in Will

SCOTT LINDSAY SHARP

Full name of applicant

AMANDA LOUISE HICKS

Estate of:

Joan Alison Cousins (in the Will called

DX:

n/a

Applicant/Firm name:

Joan Allison Cousins)

Tel:

Address:

Peter Heerey Lawyer

11-17 Stewart Street

Email:

64 24 1122

Devonport 7310

Practitioner:

peterheerey@bigpond.com PJH HEEREY

Address of applicant:

2, 221 STANLEY STREET SOUTH, LATROBE IN TASMANIA

Full name of applicant:

SCOTT LINDSAY SHARP

Address of applicant:

2, 221 STANLEY STREET SOUTH, LATROBE IN

TASMANIA

Relationship of applicant to deceased:

DAUGHTER

Relationship of applicant to deceased:

STRANGER IN BLOOD

*Australian legal practitioner acting for

applicant:

PETER HEEREY LAWYER

Address for service:

II-I7 Stewart Street Devonport

TAKE NOTE:

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

*probate of the Will dated 31/7/2015

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