

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: BARRIE REX WALLIS

Date of death: 21/03/2023

Last known residential address of deceased: QUEENBOROUGH RISE NURSING HOME 3 PEEL STREET SANDY BAY IN TASMANIA

***Address in Will:** 19 MELROSE STREET HUONVILLE IN TASMANIA

***Date of Will:** 12/02/1998

***Executor:** MARGARET JUNE WALLIS (instituted).

***Executor named in Will:** CHERIE MARGARET WOOLLEY (in the Will called CHERIE MARGARET WOOLLEY and also known as CHERI MARGARET WOOLLEY) as personal representative of the estate of the late BARRIE REX WALLIS

Estate of:
Applicant/Firm
name:

Full name of deceased
Full name

DX:
Tel:

Firm number
Number

Address:

Postal address – line one
Post address – line two

Email:
Practitioner:

Address
Initials and surname

***Executor named in Will:**

GLENN WOOLLEY (in the Will called GLENN WOOLLEY and also known as GLENN RONALD WOOLLEY) as personal representative of the estate of the late BARRIE REX WALLIS

Full name of applicant:

CHERI MARGARET WOOLLEY (in the Will called CHERIE MARGARET WOOLLEY and also known as CHERI MARGARET WOOLLEY)

Full name of applicant:

GLENN RONALD WOOLLEY (in the Will called GLENN WOOLLEY and also known as GLENN RONALD WOOLLEY)

Address of applicant:

100 CRYSTAL DOWNS DRIVE BLACKMANS BAY IN TASMANIA

Address of applicant:

100 CRYSTAL DOWNS DRIVE BLACKMANS BAY IN TASMANIA

Relationship of applicant to deceased:

CHILD and STRANGER IN BLOOD

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

N/A

Address for service:

100 CRYSTAL DOWNS DRIVE BLACKMANS BAY IN
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 12/02/1998;

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.