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: MAXINE DENISE HINDS Date of death: 25/02/2023 Last known residential address of deceased: District Health Service, Beaconsfield in Tasmania Address in Will: **Beaconsfield in Tasmania** Date of Will: 02/08/1990 **Executor named in Will:** LYALL WALTER HINDS **Executor named in Will:** TIMOTHY OSBOURN HINDS LYALL WALTER HINDS Full name of applicant: Address of applicant: District Health Service, 13 Bolton Street, Beaconsfield in Tasmania **Relationship of applicant to deceased:** Husband TIMOTHY OSBOURN HINDS Full name of applicant: Address of applicant: 40 William Street, Maryborough in Queensland **Relationship of applicant to deceased:** Nephew Australian legal practitioner acting for **Douglas & Collins** applicant:

Address for service:

9-13 George Street, Launceston 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 02/08/1990

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