

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: WOLFGANG SCHOEN

Date of death: 21/03/2023

Last known residential address of deceased: 2 Toogood Drive, Lindisfarne TAS 7015

***Address in Will:** Unit 19 16 Dove St, Claremont TAS 7011

***Date of Will:** 09/12/2020

***Executor named in Will:** KIM MANUELA CAMPBELL

Full name of applicant: KIM MANUELA CAMPBELL

Address of applicant: 88 Norma St, Howrah TAS 7018

Relationship of applicant to deceased: Child

Estate of: Wolfgang Schoen
Applicant/Firm name: Kim Campbell
Address: 88 Norma St
Howrah TAS 7018

DX: N/A
Tel: 0408486359
Email: kimkgh@hotmail.com
Practitioner: N/A

Address for service:

88 Norma St, Howrah TAS 7018

TAKE NOTE:

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

probate of the Will dated 09/12/2020;

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.