

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:	WILLIAM ALFRED SANDERS
Date of death:	22/10/2025
Last known residential address of deceased:	25 ADELAIDE STREET HOBART
*Address in Will:	25 ADELAIDE STREET SOUTH HOBART
*Date of Will:	09/04/2023
*Executor named in Will:	RODNEY JAMES SANDERS
*Executor named in Will:	PATRICIA ANN TOMKINSON
Full name of applicant:	RODNEY JAMES SANDERS
Address of applicant:	U2/47 GREVILLEA AVE OLD BEACH 7017
Relationship of applicant to deceased:	SON

Estate of:	WILLIAM ALFRED SANDERS
Applicant/Firm name:	RODNEY JAMES SANDERS
Address:	U2/47 GREVILLEA AVE OLD BEACH Tas 7017

DX:	Firm number
Tel:	0439 357 582
Email:	sandersrod996@gmail.com
Practitioner	Initials and surname
:	

Full name of applicant:

PATRICIA ANN TOMKINSON

Address of applicant:

11 MERTON STREET
GLENORCHY TAS 7010

Relationship of applicant to deceased:

DAUGHTER

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

N/A

Address for service:

U2/47 GREVILLEA AVENUE OLD BEACH

TAKE NOTE:

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

*probate of the Will dated 09/04/2023

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.