

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:** LIONEL COLIN ANDERSON

**Date of death:** 29/09/2017

**Last known residential address of deceased:** MEERCROFT NURSING HOME, CLEMENTS STREET DEVONPORT IN TASMANIA

**\*Address in Will:** 44 SURREY STREET, DEVONPORT IN TASMANIA

**\*Date of Will:** 11/05/2001

**\*Executor named in Will:** PUBLIC TRUSTEE

**Full name of applicant:** PUBLIC TRUSTEE

**Address of applicant:** 116 MURRAY STREET HOBART IN TASMANIA

**Relationship of applicant to deceased:** EXECUTOR

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Estate of:	Full name of deceased	DX:	Firm number
Applicant/Firm name:	Full name	Tel:	Number
Address:	Postal address – line one	Email:	Address
	Post address – line two	Practitioner:	Initials and surname

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

NOT APPLICABLE

**Address for service:**

116 MURRAY STREET HOBART 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 11/05/2001;](#)

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