

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: Bertie Hudson

Date of death: 15/09/2018

Last known residential address of deceased: **Grenoch Nursing Home,
Deloraine**

***Address in Will:** Room 20 Grenoch Home for the Aged,
7 East Barrack St, Deloraine in Tasmania

***Date of Will:** 05/09/2014

***Executor named in Will:** Judith Ann Triffitt
Executor named in Will: Kenneth Arthur Triffitt

Full name of applicant: Judith Ann Triffitt
Full name of applicant: Kenneth Arthur Triffitt

Address of applicants: 479 Bogan Road, Quamby Brook 7304

Estate of: Full name of deceased
Applicant/Firm name: Full name
Address: Postal address – line one
Post address – line two

DX: Firm number
Tel: Number
Email: Address
Practitioner: Initials and surname

Relationship of applicant to deceased: daughter
son in law

***Australian legal practitioner acting for applicant:** not applicable

Address for service: 479 Bogan Road, Quamby Brook 7304

TAKE NOTE:

After 14 days from the date of publication of this notice an application for a grant of:
probate of the Will dated 05/09/2014;

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.