## 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: SARA FRANCES KOZUH (also known as Sally

Kozuh)

**Date of death:** 03/07/2018

Last known residential address of deceased: Southern Cross Care

Sandown ACF

1 Wayne Avenue

**SANDY BAY TAS 7005** 

\*Address in Will: 3/3 Crescent Road, Camberwell, Victoria

\*Date of Will: 19/08/2001

\*Executor named in Will: MADELEINE SARAH WILSON (in the Will called

Madeleine Sarah Cox)

Full name of applicant: MADELEINE SARAH WILSON (in the Will called

[repeat for more applicants] Madeleine Sarah Cox)

Address of applicant: 56 Parliament Street

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

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**SANDY BAY TAS 7005** 

## Relationship of applicant to deceased:

Niece

[repeat for more applicants]

\*Australian legal practitioner acting for applicant:

Address for service:

56 Parliament Street, SANDY BAY TAS 7005

### **TAKE NOTE:**

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

\*probate of the Will dated 00/00/0000;

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.