

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: KATHLEEN CORAL SALTER

Date of death: 19/04/1018

Last known residential address of deceased: Medea Park Nursing Home, St Helens, Tasmania

***Address in Will:** 43a Giblin Street, Lenah Valley, Tasmania

***Date of Will:** 22/09/2010

***Executor named in Will:** THOMAS ALAN SALTER
[repeat for more executors]

Full name of applicant: THOMAS ALAN SALTER
[repeat for more applicants]

Address of applicant: 5 Annie Street, St Helens, Tasmania
[repeat for more applicants]

Relationship of applicant to deceased: Son
[repeat for more applicants]

***Australian legal practitioner acting for applicant:** n/a

Address for service: 5 Annie Street, St Helens, TAS, 7216

Estate of: Kathleen Coral Salter
Applicant/Firm name: Thomas Alan Salter
Address: 5 Annie Street
St Helens, TAS, 7216

DX:
Tel: 03 6376 2345
Email: chops48@bigpond.com
Practitioner:

TAKE NOTE:

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

*probate of the Will dated 22/09/2010

[for reseals see also form 3 and section 49 of the Administration and Probate Act 1935]

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.