

FORM 7

**AFFIDAVIT IN SUPPORT OF AN APPLICATION FOR LETTERS OF  
ADMINISTRATION**

Rule 55

IN THE SUPREME COURT OF TASMANIA

PROBATE REGISTRY

**In the matter of the Estate of:**

GORDON: Robert Edward

**Date of death:**

**Died between 01/06/2024 and  
02/06/2024**

**Last known residential address of deceased:**

Mount Esk Home, St Leonards, Launceston,  
Tasmania

**We**

**Full name of applicant:**

WHARTON: Mackenzie Dylan

**Address of applicant:**

8 Fraser Street, West Launceston, Tasmania

**\*Full name of applicant:**

GORDON: Christen Michal

*[repeat for more applicants]*

**\*Address of applicant:**

19 Sandown Road, Norwood, Launceston, Tasmania

*[repeat for more applicants]*

do solemnly and sincerely declare and affirm:

1. The deceased died at **St Leonards** on ***the deceased was last seen alive on 01/06/2024***

Estate of:  
Applicant/Firm  
name:

Full name of deceased  
Full name

Address:

Postal address – line one  
Post address – line two

DX:  
Tel:

Firm number  
Number

Email:

Address

Practitioner:

Initials and surname

***and their body found on 02/06/2024***

2. The Record of Death annexed to this affidavit and marked “A” is an original extract of the Record of Death of the deceased.
3. The deceased left an estate in Tasmania.
4. We have:
  - a. conducted careful searches and enquiries for a Will of the deceased and are satisfied that the deceased died without leaving a valid Will;
  - b. \*searched the deceased’s personal papers and effects and did not find a Will;
  - c. \*made enquiries with TPT Wealth LTD and the Public Trustee in Tasmania and have been informed that they do not hold a Will on behalf of the deceased;
  - d. \*caused a notice to be placed in the Tasmanian Law Society Newsletter searching for the deceased’s Will and have not received a response to the notice
5. We are 18 years of age or older.
6. We are one of the persons entitled to share in the estate of the deceased.
7. We are the:  
*[the order of priority to apply is set out in rule... select the first category which applies]*  
  
\*children\* of the deceased
8. There is no prior right for the grant of letters of administration.
9. There is an equal right for the grant of letters of administration.
10. No person under the age of 18 years is entitled to share in the estate.
11. We believe the following persons have a beneficial interest in the estate of the deceased

pursuant to the provisions of the *Intestacy Act 2010*:  
GORDON; Christine May

12. Notice of Intention to make this application, a true copy of which is annexed and marked “**B**” was published on the Supreme Court of Tasmania’s website on 00/00/0000.  
*[do not sign this affidavit until 14 days has elapsed since the Notice was published]*
13. We have made no other application for a grant in respect of the estate of the deceased.
14. We will administer according to law all the estate which by law devolves to and vests in us as personal representatives of the estate of the deceased.
15. We annex and mark “**C**” an inventory of the assets and liabilities of the deceased’s estate held in the name of the deceased and all aliases of the deceased.
16. The values set out in the inventory are fair and reasonable at the date of swearing this affidavit and the liabilities set forth in the inventory are justly due at the date of swearing this affidavit.
17. In the event of finding that the assessment is inaccurate or incomplete in a way that materially effects the value of the estate We will provide a further affidavit annexing a revised inventory correcting any inaccuracy or deficiency.
18. We undertake to provide an updated inventory of the real and personal estate of the deceased and deliver up the grant to the Court whenever required by law to do so.
19. *[Please add any further relevant information required to allow the Court to process your application]*

\*SWORN/\*AFFIRMED by

FULL NAME

at SUBURB OR TOWN in STATE

dated 00/00/000

Before me:

.....

.....

FULL NAME

\*SOLICITOR/\*JUSTICE OF THE PEACE

\*SWORN/\*AFFIRMED by

FULL NAME

at SUBURB OR TOWN in STATE

dated 00/00/000

.....

Before me:

*[repeat for more applicants]*

.....

FULL NAME

\*SOLICITOR/\*JUSTICE OF THE PEACE

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.

TAKE NOTE:

If you are making this application more than 2 years after the date of death of the deceased please refer to Rule... and include the following matters in your affidavit:

- i. An inventory of assets and liabilities of the deceased’s estate at the time of the deceased’s death;
- ii. An inventory of assets and liabilities of the deceased’s estate at the date of the making of the application;
- iii. The reason why an application in respect of the deceased has not been made previously;
- iv. The reasons why the application is now being made.