

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: SARAH LYNNE GREEN

Date of death: 22/04/2024

Last known residential address of deceased: 19 Mitcham Road, Claremont, Tasmania, 7011

***Address in Will:** 19 Mitcham Road, Claremont, Tasmania, 7011

***Date of Will:** 12/05/2011

***Executor named in Will:** LEESA MAY GREEN

***Executor named in Will:** AMY ELIZABETH ENGLUND [in the will called AMY ELIZABETH GREEN]

Full name of applicant: LEESA MAY GREEN

Address of applicant: 1/649 Main Road, Berriedale, Tasmania, 7011

Estate of: Sarah Lynne Green
Applicant/Firm name: Leesa May Green
Address: 1/649 Main Road
Berriedale, Tasmania, 7011

DX: Not applicable
Tel: 0427391644
Email: Leesa.green@ths.tas.gov.au
Practitioner: Not applicable

Relationship of applicant to deceased: sister

Full name of applicant: AMY ELIZABETH ENGLUND

Address of applicant: 20A Upper Hilton Road, Claremont, Tasmania, 7011

Relationship of applicant to deceased: sister

Address for service: 1/649 Main Road, Berriedale, Tasmania, 7011

TAKE NOTE:

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

*probate of the Will dated 12/05/2011;

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.