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| ΝΟΤΙΟΙ | E OF INTENTION TO APP | LY FOR GRANT OR RESEAL OF | |
| | A GRA | NT | |
| | Ru | ıle 33 | |
| IN THE SUPREME C | COURT OF TASMANIA | | |
| PROBATE REGISTR | ΥY | | |
| In the matter of the Estate of: | | KATHRYN GRANT | |
| Date of death: | | 16/12/2024 | |
| Last known residential address of deceased: | | Unit 1/6 Fossey Place, Miandetta, TAS 7310 | |
| | | | |
| *Address in Will: | | Unit 1/6 Fossey Place, Miandetta, TAS 7310 | |
| *Date of Will: | | 09/12/2024 | |
| *Executor named in Will: | | I. DAVID ANDREW ROBERTS | |
| | | 2. KERRI-ANN ROBERTS | |
| | | | |
| Full name of applicant: | | DAVID ANDREW ROBERTS | |
| Address of applicant: | | 166 Main Street, Sheffield, TAS 7306 | |
| Relationship of applicant to deceased: | | Stranger in blood | |
| Estate of: Applicant/Firm name: Address: | Kathryn Grant David Andrew Roberts 166 Main Street Sheffield TAS 7306 | DX: N/A Tel: 0408192572 Email: robertsdk@bigpond.com Practitioner: N/A | |

*Australian legal practitioner acting for applicant:

Not Applicable

Address for service:

166 Main Street, Sheffield, TAS 7306

TAKE NOTE:

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

*probate of the Will dated 09/12/2024;

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.