

AFFIDAVIT TO LEAD TO CITATION TO ACCEPT OR REFUSE ADMINISTRATION

SUPREME COURT OF SOUTH AUSTRALIA
TESTAMENTARY CAUSES JURISDICTION

In the Estate of **[FULL NAME OF DECEASED]** (Deceased)

I, *[full name, address, postcode and occupation of deponent]*, *[swear on oath / do truly and solemnly affirm]* that:

- 1 *[Full name of deceased]* late of *[address and postcode]* deceased (“the deceased”) died at *[suburb]* *[postcode]* on *[date]* intestate leaving *[full name of spouse]* of *[address and postcode]* their *[surviving spouse]* and one of the persons entitled to share in their estate.
- 2 There is no person adjudged under the *Family Relationships Act 1975* (SA) to have been a domestic partner of the deceased as at the date of their death.
- 3 *[Full name of surviving spouse]* has not yet taken upon themselves letters of administration of the estate of the deceased or renounced their right to apply.
- 4 I am the *[relationship to the deceased]* and one of the persons entitled to share in the estate of the deceased.
- 5 I wish to obtain letters of administration of the estate of the deceased.
- 6 The deceased left *[real and personal estate / real estate only / personal estate only]* in the State of South Australia.

[Sworn/Affirmed] by the abovenamed deponent at *[place and postcode]* on *[date]*.

.....
[signature of deponent]

before me

.....
[signature of authorised witness]
[print name of witness]
[print title of authorised witness]
[ID number of witness]

Note

- 1 If the intestate died leaving a domestic partner (adjudged under Part 3 of the *Family Relationships Act 1975* (SA)) then amend this form to substitute the word “spouse” with the words “domestic partner”, delete paragraph numbered 2 of the Form and renumber the subsequent paragraphs.