**AFFIDAVIT - CITATION - TO ACCEPT OR REFUSE DOUBLE PROBATE**

SUPREMECOURT 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*] having made and duly executed their last will bearing date [*date*] (“the will”) and therein named [*full name of executor*] of [*address and postcode*] and [*full name of executor*] of [*address and postcode*] their executors.

2 On [*date*] probate of the will was granted by the Court to the said [*full name of proving executor*] one of the executors named in the will, leave being reserved for [*full name of leave reserved executor*] the other executor to apply for probate *[ensure all executors named in the will have been cleared off]*.

3 [*Full name of proving executor*] died on [*date*] leaving part of the estate unadministered.

4 [*Full name of leave reserved executor*] has not yet taken probate of the will.

5 I am the sole executor of the will of the said [*full name of proving executor*] probate whereof was granted to me by the Court on [*date*] and I wish to act as executor by transmission of executorship of the will of the said [*full name of deceased*] deceased.

6 To the best of my knowledge information and belief the deceased died possessed of assets in the State of South Australia remaining unadministered.

[*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*]