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

## 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*] 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]