PROBATE REGISTRY - **FORM A**INFORMATION FILING FORM **FOR A NEW APPLICATION**

ESTATE NO.: EST	ATTORNEY FOLDER NO.:
NAME OF DECEASED: Estate of	
<u> </u>	(NAME AS STATED ON DEATH CERTIFICATE)
DATE OF DEATH:	REG. GENERAL RECEIPT NO. TR
VALUE OF ESTATE (Please tick app	aronriate hov)
	□ \$4,800 - \$14,400 □ \$14,400 - \$48,000 □ exceeds \$48,000
ARE THERE ANY RELATED PROBAT	TE AND / OR CIVIL MATTERS?
IS A WILL/CODICIL LODGED IN THI	E DEPOSITORY? NO YES WILL#
FILING ATTORNEY INFORMAT	
BAR NO.: NAI	ME OF ATTORNEY
NAME OF FIRM / CHAMBERS:	
ADDRESS:	
TEL. NO. 1: TEL. N	NO. 2: FAX. NO.:
EMAIL:	
NAME OF APPLICANTS	
(1)	(2)
(3)	(4)
NATURE OF APPLICATION	
☐ GRANT – PROBATE	
☐ GRANT – LETTERS OF ADMINIST	RATION
\square Grant – Letters of administ	RATION WITH WILL ANNEXED
\square Grant – administration de	BONIS NON
$\hfill\Box$ Grant – administration de	BONIS NON WITH WILL ANNEXED
☐ GRANT – DOUBLE PROBATE	
☐ GRANT – CESSATE ADMINISTRA	TION
☐ GRANT – CESSATE ADMINISTRA	TION WITH WILL ANNEXED
\square GRANT – LETTERS OF ADMINIST	RATION – PREVIOUS GRANT ISSUED (BY NON COMMONWEALTH COUNTRY)
\square Grant – Letters of administ	RATION WITH EXEMPLIFIED COPY OF WILL (NON COMMONWEALTH COUNTRY)
☐ GRANT – RESEALING	
\square GRANT – ADMINISTRATION AD	COLLIGENDA BONA
☐ CITATION	
☐ OTHER	

(PLEASE SPECIFY)