IN THE SUPREME COURT OF VICTORIA IN ITS PROBATE JURISDICTION

S PRB [Application No.]

In the matter of the deceased estate of [name]

Application by:

Tel: [number]

[Plaintiff's name]

Plaintiff(s)

AFFIDAVIT OF NOMINATION AND CONSENT

Date of document: Filed on behalf of the plaintiff Prepared by: *[name and address of lodging party]*

Ref: [solicitors only] DX: [solicitors only] CODE: [solicitors only] E-mail: [e-mail address]

I, [name] of [address], Victoria [occupation] affirm/make oath and say:

- 1. I am over the age of 18 years and under no legal disability.
- 2. I am the [*relationship to the deceased*] of [*deceased's name*] ('the deceased') and a person entitled to apply for letters of administration of the deceased's estate.
- 3. I do hereby nominate [*Plaintiff's name*] ('the plaintiff') of [*Plaintiff's address*] being the [*relationship of Plaintiff to the deceased*] of the deceased to obtain a grant of letters of administration with respect of the deceased's estate.
- 4. I ask the Court to appoint the plaintiff as administrator of the deceased's estate as the following special circumstances apply: [*Detail the special circumstances*].
- 5. I understand as the [*relationship to the deceased*] of the deceased I am entitled to share in the deceased's estate and would be entitled to apply for letters of administration of the deceased's estate, and that the plaintiff who is not entitled to share in the deceased's estate would usually not be entitled to apply.
- 6. I consent to a grant of letters of administration being made to the plaintiff.

The contents of this affidavit are true and correct and I make it knowing that a person making a false affidavit may be prosecuted for the offence of perjury.

the deponent at [place] on [date]

> Before me: Witness Full Name Address Qualification A person authorised under section 19(1) of the *Oaths and Affirmations Act 2018* to take an affidavit.