

**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:

[*Plaintiff's name*]

Plaintiff(s)

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*]

Tel: [*number*]

1. I [*insert name and address*] say I am over the age of 18 years and under no legal disability.
2. I am a person who would be affected by a decision under section 9 of the *Wills Act 1997*.
3. I DO HEREBY CONSENT to the Registrar of Probates exercising the power of the Court pursuant to section 9 of the *Wills Act 1997*.

Dated [*insert date*]

SIGNED by [*insert name*]

In the presence of [*insert name*]

SIGNATURE of witness

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S PRB [*Application No.*]

In the matter of the deceased estate of [*name*]

Application by:

[*Plaintiff's name*]

Plaintiff(s)

CERTIFICATE IDENTIFYING EXHIBIT

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

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

This is the exhibit marked " " now produced and shown to [*insert name*] at the time of swearing/affirming their affidavit on [*insert date*]:

.....
[Signature of authorised witness]

.....
[Signature of deponent]

Exhibit " "
Consent