|  |  |
| --- | --- |
| In the matter of the will of [*insert name*] |  |
|  |  |

# AFFIDAVIT BY LEGAL PRACTITIONER/TRUSTEE COMPANY AS THE NOMINEE OF EXECUTOR(S) IN SUPPORT OF A REQUEST TO UPLIFT A WILL

|  |  |  |  |
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I, [*insert name and address of requestor]* affirm/make oath and say that:

1. I am the legal practitioner/employee of the trustee company acting as the nominee of [*insert name(s) of the executor(s)*] named in the will of [*insert name*] (deceased) which is deposited in the office of the Registrar of Probates numbered [*insert will number*]. I hereby apply for delivery of the said will to me as the nominee of the said executor(s).
2. I have confirmed the identity of the executor(s) and now produced and shown to me marked “A” is a certified copy of the executor(s) [*insert type of photo identification*].
3. The deceased died on [*insert date*] and I believe the deceased is the person referred to in the certified copy of death registration now produced and shown to me marked “B”.
4. [*insert any other relevant evidence as required*].

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.

|  |  |
| --- | --- |
| Sworn/affirmed by: |  |
| [*insert name*] |  |
| At [*insert place*] |  |
| On [*insert date*] |  |
| Before me |  |
|  | A person authorised under section 19(1) of the *Oaths and Affirmations Act 2018* to take an affidavit. |
|  |  |

|  |  |
| --- | --- |
| In the matter of the will of [*insert name*] |  |

**CERTIFICATE IDENTIFYING EXHIBIT**

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

…………………………………….… …………………………………….…

[Signature of authorised witness] [Signature of requestor]

**Exhibit "A"**

 ***Certified copy of photo identification***

|  |  |
| --- | --- |
| In the matter of the will of [*insert name*] |  |

**CERTIFICATE IDENTIFYING EXHIBIT**

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| Date of document: |  | Phone: |  |
| Filed by: |  | Email: |  |
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This is the exhibit marked “B” now produced and shown to [*insert name of requestor*] at the time of swearing/affirming their affidavit on [*insert date*]:

…………………………………….… …………………………………….…

[Signature of authorised witness] [Signature of requestor]

**Exhibit "B"**

 ***Certified copy of death registration***