

**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)

AFFIDAVIT OF DUE EXECUTION BY REMOTE EXECUTION PROCEDURE

Date of document:

Filed on behalf of the Plaintiff

Prepared by: [*name and
address of lodging party*]

Ref: [*solicitors only*]

CODE: [*solicitors only*]

Tel: [*number*]

E-mail: [*e-mail address*]

Guidance for completing this affidavit

This affidavit should be completed by a witness who signed a will using the remote execution procedure under section 8A of the *Wills Act 1997*. It is preferable the affidavit is completed by the special witness.

Only include information that you personally saw, heard or experienced. Do not include information that is based only on what another person told you or information that you assume to be true.

Complete the information requested wherever you see words in square brackets []. Before the document is signed, remove this guidance section and any instructions or examples in the document.

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

1. I am one of the witnesses who signed the will of [*full name of the deceased*] ("the deceased") dated [*date*] ("the will"), a copy of which is now produced and shown to me marked "A".
2. I [*am/am not*] the special witness for the purposes of section 8A of the *Wills Act 1997* ("the remote execution procedure").
3. All parts of the remote execution procedure occurred on [*date*].
4. The following persons participated in the remote execution procedure:

- a. the deceased;
 - b. myself;
 - c. *[name of other signing witness]*;
 - d. *[name of any other person present or state "Only the above people participated"]*.
5. At the time the will was signed, the persons physically present with the deceased were: *[provide details or state "the deceased was physically alone"]*.
6. At the time the will was signed, the following persons participated by audio visual link: *[provide names]*.
7. The physical location of each participant was:
 - a. the deceased: *[address in Victoria]*;
 - b. myself: *[address in Victoria]*;
 - c. *[name of other signing witness]*: *[address in Victoria]*.
8. At the time the deceased signed the will, both witnesses were participating in the remote execution procedure in the manner described above.
9. I personally observed the following matters when the deceased signed the will which satisfied me that I could clearly see the deceased signing the will: *[provide details of what you observed, including how you could see the deceased sign the will or apply their signature]*.
10. I personally saw *[name of other signing witness]* sign the will and, at that time, the deceased was participating in the remote execution procedure in the manner described above.
11. I personally observed the following matters when *[name of other signing witness]* signed the will which satisfied me that the deceased could clearly see *[name of other signing witness]* signing the will: *[provide details of whether you confirmed with the deceased what they could see and what you observed, including how you could see the other witness sign the will or apply their signature]*.
12. Before signing the will, I was reasonably satisfied that the document I signed was the same document that I had observed the deceased sign. The reasons I was satisfied it was the same document were: *[provide details]*.
13. I personally signed the will as a witness and, at that time, the deceased was participating in the remote execution procedure in the manner described above.

14. I was satisfied the deceased could clearly see me signing the will for the following reasons: *[provide details of what steps were taken to make sure the deceased could see you signing the will]*.
15. The following further information is relevant to the remote execution procedure, including any steps taken by the special witness, the audio visual technology used, whether the will was read, explained or translated for the deceased, or any other circumstances relating to the signing of the will: *[provide details or state 'I have no further information to provide']*.
16. The facts set out above are matters that I personally saw, heard or experienced.

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
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.

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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*]

Ref: [*solicitors only*]

CODE: [*solicitors only*]

Tel: [*number*]

E-mail: [*e-mail address*]

This is the exhibit marked "A" 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 "A"

Copy of the will