

**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 NOMINATION AND CONSENT

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 person who is entitled to share in the deceased's estate but who wants another person to apply to administer the estate instead.

The Court will usually require more than a statement that you do not want to apply for administration yourself. Examples of matters that may be relevant include your age, health, location, language difficulties and other personal circumstances.

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

1. I am over 18 years of age and legally able to make this affidavit.
2. [*Deceased's full name*] ('the deceased') died on [*date*].
3. I am entitled to receive part of the deceased's estate because [*provide details, for example, "I am a beneficiary under the deceased's will", or if there is no will "I am the deceased's spouse" or "I am the deceased's child"*].

4. I understand that I would ordinarily be able to apply to be appointed administrator of the deceased's estate.
5. I nominate [*proposed administrator's full name*] ('the proposed administrator') to apply for and obtain letters of administration of the deceased's estate.
6. My relationship with the proposed administrator is: [*provide details*].
7. I have known the proposed administrator since [*year*].
8. The reasons I do not wish to apply for administration of the estate myself are: [*provide details. For example, your age, health, location, work commitments, family responsibilities, language difficulties or other circumstances that make it difficult or inappropriate for you to administer the estate*].
9. The following circumstances lead me to support the appointment of the proposed administrator: [*provide details. For example, the proposed administrator's relationship with the deceased, their knowledge of the deceased's affairs, their ability to administer the estate, or other circumstances that make them an appropriate person to act*].
10. I understand that I would ordinarily be able to apply for administration of the deceased's estate before the proposed administrator.
11. I consent to a grant of letters of administration being made to the proposed administrator.
12. 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.