

Courts of Justice Act

APPLICATION FOR CERTIFICATE OF APPOINTMENT AS SUCCEEDING ESTATE TRUSTEE WITH A WILL LIMITED TO THE ASSETS REFERRED TO IN THE WILL

ONTARIO

SUPERIOR COURT OF JUSTICE

APPLICATION FOR CERTIFICATE OF APPOINTMENT AS SUCCEEDING ESTATE TRUSTEE WITH A WILL LIMITED TO THE ASSETS REFERRED TO IN THE WILL
(Form 74.21.1 Under the Rules)

at

This application is filed by *(insert name and address)*

DETAILS ABOUT THE DECEASED PERSON

Complete in full as applicable

First given name	Second given name	Third given name	Surname
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And if the deceased was known by any other name(s), state below the full name(s) used including surname.

First given name	Second given name	Third given name	Surname
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Date of birth of the deceased person, if known: *(day, month, year)*

PARTICULARS OF FIRST CERTIFICATE

Name(s) of estate trustee(s)	Date issued <i>(day, month, year)</i>
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VALUE OF UNDISTRIBUTED ASSETS OF ESTATE

Personal property	Real estate, net of encumbrances	Total
\$	\$	\$

Explain why the applicant is entitled to apply.

AFFIDAVIT(S) OF APPLICANT(S)

(Attach a separate sheet for additional affidavits, if necessary.)

I, a trust officer named in this application, make oath and say/affirm:

- 1. I am a trust officer of the corporate applicant.
- 2. I am 18 years of age or older.
- 3. The corporate applicant will faithfully administer the deceased person's property according to law and render a complete and true account of its administration when lawfully required.
- 4. If the corporate applicant is not named as estate trustee in the will or codicil, consents of persons who together have a majority interest in the value of the undistributed assets of the estate at the date of this application are attached.
- 5. The information contained in this application and in any attached schedules is true, to the best of my knowledge and belief.

Name of corporate applicant	Name of trust officer		
Address of corporate applicant <i>(street or postal address)</i>	<i>(city or town)</i>	<i>(province)</i>	<i>(postal code)</i>

Sworn/Affirmed before me at the.....
of
in the.....
of
this..... day of, 20.....

Signature of trust officer

A Commissioner for taking Affidavits *(or as may be)*

I, an applicant named in this application, make oath and say/affirm:

- 1. I am 18 years of age or older.
- 2. I will faithfully administer the deceased person's property according to law and render a complete and true account of my administration when lawfully required.
- 3. If I am not named as estate trustee in the will or codicil, consents of persons who together have a majority interest in the value of the undistributed assets of the estate at the date of this application are attached.
- 4. The information contained in this application and in any attached schedules is true, to the best of my knowledge and belief.

Name <i>(surname and forename(s))</i>	Occupation		
Address <i>(street or postal address)</i>	<i>(city or town)</i>	<i>(province)</i>	<i>(postal code)</i>

Sworn/Affirmed before me at the.....
of
in the.....
of
this..... day of, 20.....

Signature of applicant

A Commissioner for taking Affidavits *(or as may be)*