

## Courts of Justice Act

## APPLICATION FOR CERTIFICATE OF APPOINTMENT OF ESTATE TRUSTEE DURING LITIGATION

ONTARIO

SUPERIOR COURT OF JUSTICE

APPLICATION FOR CERTIFICATE OF  
APPOINTMENT OF ESTATE TRUSTEE  
DURING LITIGATION

(form 74.30 Under the Rules)

at

This application is filed by *(insert name)*

## 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

**Date of birth of the deceased person, if known:** *(day, month, year)***Address of fixed place of abode** *(street or postal address) (city or town)**(county or district)*

If the deceased person had no fixed place of abode in Ontario, did he or she have property in Ontario?

 No  Yes**Last occupation of deceased person****Place of death** *(city or town; county or district)***Date of death**  
*(day, month, year)*

## VALUE OF ASSETS OF ESTATE

Do not include in the total amount: insurance payable to a named beneficiary or assigned for value, property held jointly and passing by survivorship, or real estate outside Ontario

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

This application is made pursuant to an order for the appointment of an estate trustee during litigation, made by

*(name of judge)**(day, month, year)*

on

**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, make no distribution without a court order, and render a complete and true account of its administration when lawfully required.
- 4. The information contained in this application and in any attached schedules is true, to the best of my knowledge and belief.

<b>Name of corporate applicant</b>	<b>Name of trust officer</b>		
<b>Address of corporate applicant</b> <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, make no distribution without a court order and render a complete and true account of my administration when lawfully required.
- 3. The information contained in this application and in any attached schedules is true, to the best of my knowledge and belief.

<b>Name</b> <i>(surname and forename(s))</i>	<b>Occupation</b>		
<b>Address</b> <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)*