# FORM 74.5.1

## Courts of Justice Act

# APPLICATION FOR CERTIFICATE OF APPOINTMENT OF ESTATE TRUSTEE WITH A WILL (CORPORATE APPLICANT) LIMITED TO THE ASSETS REFERRED TO IN THE WILL

#### ONTARIO

## SUPERIOR COURT OF JUSTICE

at

This application is filed by (insert name and address)

## DETAILS ABOUT THE DECEASED PERSON

Complete in full as applicable					
Second given name	Third given name	Surname			
And if the deceased was known by any other name(s), state below the full name(s) used including surname.					
Second given name	Third given name	Surname			
	Second given name nown by any other name(s)	Second given name     Third given name       nown by any other name(s), state below the full name(s)     State below the full name(s)			

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?	Last occupatior	n of deceased person		
🗌 No 🗌 Yes				
Place of death (city or town; county or district)	Date of death (day, month, year)	Date of last will (marked as Exhibit "A") (day, month, year)		
Was the deceased person 18 years of age or older at the date of the will (or 21 years of age or older if the will is dated earlier than September 1, 1971)?				
If not, explain why certificate is being sought. Give details in an attached schedule.				

Date of codicil (marked as Exhibit "B") (day, month, year)	<b>Date of codicil</b> (marked as Exhibit "C") (day, month, year)
Marital Status 🗌 Unmarried 🗌 Marri	ed 🗌 Widowed 🗌 Divorced
Did the deceased person marry after the d	ate of the will?
If yes, explain why certificate is being soug an attached schedule.	ght. Give details in
Was a marriage of the deceased person to judgment absolute of divorce, or declared date of the will?	-
If yes, give details in an attached schedule	
Is any person who signed the will or a cod the testator, or the spouse of such person, the will?	
If yes, give details in an attached schedule	
	RED TO IN ATTACHED WILL A" to this application)
Note	

Note:

- Under "Real estate, net of encumbrances", do not include any real estate in Ontario that is held jointly and passes by survivorship or any real estate outside Ontario.
- Under "Personal Property", do not include money or property held jointly and passing by survivorship (such as a bank account), or money or property to which a person is entitled by virtue of a beneficiary designation under, for example, a life insurance contract, a registered pension plan, a registered retirement savings plans, a registered retirement income fund, a life income fund, a locked-in retirement account or a tax free savings account.

Personal property	Real estate, net of encumbrances	Total
\$	\$	\$
Is there any person interested applicant?	d in the estate who is not an	🗌 No 🗌 Yes
If a person named in the will o	or a codicil as estate trustee is	not an applicant, explain.

If a person not named in the will c	r a codi	cil as	estate	trustee	is an	applicant,	explain
why that person is entitled to appl	у.						

If the spouse of the deceased is an applicant, has the spouse elected	
to receive the entitlement under section 5 of the Family Law Act?	No

If yes, explain why the spouse 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:

- I am a trust officer of the corporate applicant.
  If the corporate applicant is not named estate trustee in the will or codicil, consents of persons who together have
- 2. I am 18 years of age or older.
- 3. The exhibit(s) referred to in this application are the last will and each codicil (where applicable) of the deceased person relating to the assets referred to in the will and I do not know of any later will or codicil affecting those assets.
- 4. 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.
- 5. 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 assets of the estate at the date of death are attached.
- 6. 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 t	rust officer	
Address (street or postal address)	(city o	or town)	(province)	(postal code)

☐ Yes

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. The exhibit(s) referred to in this application are the last will and each codicil (where applicable) of the deceased person and I do not know of any later will or codicil.
- 3. 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.
- 4. 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 assets of the estate at the date of death are attached.
- 5. The information contained in this application and in any attached schedules is true, to the best of my knowledge and belief.

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

Sworn/Affirmed befor	re me at the	
of		
in the		
of		
this day of	, 20	Signature of applicant

A Commissioner for taking Affidavits (or as may be)

**Notice to applicant:** Information provided on this form related to the payment of estate administration tax may be forwarded to the Ministry of Finance pursuant to clause 39(1)(b) and 42(1)(c) of the *Freedom of Information and Protection of Privacy Act*. This includes the name of the deceased, name and address of estate trustee(s), value of the estate and any undertakings and tax payments made or refunded. This information will be used by the Ministry of Finance to determine the value of estates and the amount of estate administration tax payable. Questions about the collection of this information should be directed to the Senior Manager – Audit, Advisory and Compliance Branch, 33 King Street West, PO Box 625, Oshawa ON L1H 8H9, 1-866-668-8297.