|  |
| --- |
| FORM 74B.1 |
| *Courts of Justice Act* |
| ONTARIO |
| **SUPERIOR COURT OF JUSTICE** |
| IN THE ESTATE OF *(insert name),* deceased. |

LAWYER’S CERTIFICATE OF SERVICE OF

APPLICATION FOR A CERTIFICATE OF APPOINTMENT OF ESTATE TRUSTEE

I, *(insert name),* a lawyer licensed by the Law Society of Ontario, certify that:

1. I am the lawyer for the applicant for a certificate of appointment of estate trustee in the above-noted estate.
2. This is a certificate of service for an: *(select one)*

[ ]  Application for Certificate of Appointment of Estate Trustee with a Will

[ ]  Application for Certificate of Appointment of Estate Trustee with a Will Limited to the Assets Referred to in the Will

[ ]  Application for Certificate of Appointment of Estate Trustee without a Will

1. I: *(select one)*

[ ]  served a copy of the sworn/affirmed Application dated *(insert date)* myself.

[ ]  caused *(insert name of person who served)* to serve a copy of the sworn/affirmed Application dated *(insert date)*, and I am satisfied that service was effected.

1. I have served a copy of the sworn/affirmed application on: *(check all that apply)*

[ ]  each person entitled to share in the distribution of the estate, including charities and contingent beneficiaries;

[ ]  the Children’s Lawyer on behalf of the estate beneficiaries who are under the age of eighteen years and/or on behalf unborn and unascertained persons who may have an interest in the estate by *(insert email, mail, courier or personal service)* on *(date).* I served this copy of the application together with a copy of the Application, a copy of the Will or Codicil, if any.

[ ]  the parents/guardians of persons under the age of eighteen years who may have an interest in the estate.

[ ]  the attorney for any adults who meet the definition of “incapable” as set out in Part 6 of the Application form.

[ ]  the Public Guardian and Trustee for any adults who meet the definition of “mentally incapable” and there is no guardian or attorney specified in Part 6 of the Application form b by *(insert email, mail, courier, or personal service)* on *(date).* I served together with a copy of the Application, a copy of the Will or Codicil, if any.

1. The above-noted Application was served on each of the above persons by email, mail, courier or personal service in accordance with rule 74.04(7) of the *Rules of Civil Procedure*.
2. *(Insert if applying with a Will)* I have served together with each copy of the Application served on the persons identified in paragraph 4 the following:
	1. an extract of the part or parts of the Will or codicil relating to the gift, or a copy of the Will (and codicil(s), if any), in the case of an application served on or in respect of a person entitled only to a specified item of property or stated or determinable amount of money,
	2. a copy of the Will (and codicil(s), if any), in the case of an application served or in respect of any other beneficiary,
	3. a copy of the Will (and codicil(s), if any) and a statement of the estimated value of the interest of a minor or an adult described in the application as lacking capacity, as the case may be, if that value is not disclosed in the application form, in the case of an application served on the Children’s Lawyer or the Public Guardian and Trustee.
3. *(Insert if applying with a Will and any persons and charities named in the Will have not been served with the application)* The following persons and charities specifically named in the Will are not entitled to be served for the reasons shown below:

|  |  |
| --- | --- |
| Name of person *(as it appears in Will, if any)* | Reason not served |
|  |  |
|  |  |

1. *(Insert if the application has not been served on persons who are named in the Will or who are members of a class of beneficiaries under the Will or on persons entitled under an intestacy pursuant to the* Succession Law Reform Act*)* The following persons may be entitled to be served but have not been served for the reasons shown below:

|  |  |
| --- | --- |
| Name of person *(as it appears in Will, if any)* | Reason not served |
|  |  |
|  |  |

To the best of my knowledge and belief, subject to the above paragraph (if applicable), the persons named in the application are all the persons who are entitled to share in the distribution of the estate.

*(If there is more than one deponent, attach a separate sheet for additional affidavits.)*

I certify that the information contained in this certificate of service is true, to the best of my knowledge and belief.

|  |  |  |
| --- | --- | --- |
|  |  |   |
| Signature of Lawyer | Date |

|  |  |
| --- | --- |
| Lawyer’s name: |  |
| Lawyer’s firm: |  |
| Lawyer for: |  |
| Law Society of Ontario #: |  |
| **Contact information** |  |
| Street address: |  |
| City or town: |  |
| Province: |  |
| Postal code: |  |
| Country: |  |
| E-mail address: |  |
| Telephone number: |  |

RCP-E-74B.1 (January 1, 2025)