SERVICE BUREAU FORM FOR APPLICATION FOR LETTERS OF ADMINISTRATION

| Litigation | IA Lotter of Administration | Template - R |
|----------------------------|---|---|
| Please ' tick ' and comple | LA - Letter of Administration te all the following Data Fields marked with an asterisk (*)) | Filing Guide & Reference |
| | Nature of Probate : Letters of Administration | |
| Type of LA appl | | Party Type |
| 21 | | Filing party : Applicant |
| To be hea | rd in : * Family Justice Courts : Family Division of the High Court Family Courts | |
| ase No.* | | Case Type Family Courts : P |
| o N * | Court Forum Case Type Serial No. Year (Please provide the Case no. [P] when | |
| Case No. : * | filing for Amendment and complete | |
| | (Amendment No.)* | |
| arty Information * | | |
| Please com | plete the Party Details for at least one Applicant. | |
| | / Details Template - A2, click <u>here</u> . | |
| eceased Details * | | |
| | (Name as in the Death Certificate for certificates issued in Singapore and True Name if the death certificate is issued outside Singapore) | Actions |
| | issued outside Singapore) | Ex-parte Originating Summons (Probate & Statement are composed by the system |
| | | No PDF attachment is required. |
| | | Upload the following documents to the system. 1) Death Certification |
| 1) Alias : | | PDF attachment is required. |
| 1) / 1103 . | | |
| | | |
| | (To be completed where there are other names apart from that in the Death Certificate) | |
| | Property Held in Alias | |
| | None | |
| | Property as below: | |
| | | |
| | | |
| | | |
| | | |
| 2) Alias: | | |
| | | |
| | | |
| | (To be completed where there are other names apart from that in the Death Certificate) | |
| | Property Held in Alias | |
| | | |
| | Property as below: | |
| | | |
| | | |
| | | |
| Gender : * | Male Female Unknown | |
| | | |
| Identification : * | ID as follows : Unknown Does Not Exist | |
| | | |
| | Type : * SIN NRIC SIN Birth Certificate Foreign Passport SIN FIN Unknown Others : (Please Specify) | |
| | | |
| | | |
| | | |
| | Identification No : * | |
| | Country of Issue : * | |
| | | |
| | | 1 |

FREQUENTLY ASKED QUESTIONS

 Which court should I file the application for Letters of Administration in? For cases within the scope of this Toolkit, the application should be filed in the Family Courts.

> Applications involving estates not exceeding \$5 million should be filed in the Family Courts.

Applications involving estates exceeding \$5 million in value should be filed in the Family Division of the High Court.

Please note that additional rules and requirements may apply to applications filed in the Family Division of the High Court. These additional requirements are not within the scope of this toolkit.

| | Address : * | Not Available | |
|------------|-----------------------|--|--|
| | | □ Local (Postal Code :) □ Foreign (Country :) | |
| | | | |
| | | Building Name (If any) : | |
| | Place of Death : * | Address Country | |
| | | (Please state the address and country.) | |
| | Date of Death : * | Exact Date : * | Date Format (dd-mmm-yyyy) |
| | | Date Range : to (dd-mmm-yyyy) (dd-mmm-yyyy) | Eg. 18-Aug-2008 |
| | | If you are unsure of the date, enter the first day of the beginning month to the last day of the ending month. (E.g. 1-M ar-2009 to 30- Apr-2009) | |
| | Estate Value : * | Not exceeding \$3 million Exceeding \$3 million << (For FC filing only) | |
| | | Not exceeding \$1 million Exceeding \$1 million << (For HCF filing only) | |
| | Domicile : * | | |
| | | State (Where applicable) Country | |
| | Marital Status : * | Bachelor Divorced Married Spinster | |
| | | Widow Widower | |
| | Nationality : * | | Nationality Please refer to Table (1-11). |
| | Religion : * | | Religion Please refer to Table (1-17). |
| \searrow | School of | M adzhab (Please specify for Muslim religion) | |
| Questio | Religion : * | | |
| | | e made to any Co-administrator besides the Applicant(s)? * Yes No | |
| 1) | Co-Administra | tor(s) Details | |
| 1) | Name : * | | |
| | Relationship to | If selected as "Others", please specify Other Relationship. | Relationship to Deceased |
| | Deceased : * | | Please refer to Table (1-20). |
| | Gender : * | Male Female | |
| | Identification : * | ID as follows : Unknown Does Not Exist Please Specify Remarks : | |
| | | | |
| | | Type : * SIN NRIC SIN Birth Certificate Foreign Passport SIN FIN Unknown Others : (Please Specify) | |
| | | | |
| | | | |
| | | Identification No : * | |
| | | Country of Issue : * | |

 Why does the form refer to "Not Exceeding \$3 million" and "Exceeding \$3 million" for FC (Family Courts) filings?

Higher filing fees are payable for applications filed in the Family Courts involving estates which exceed \$3 million.

| | | 1 |
|--------------|--|---|
| Address : | * Not Available | |
| | Local (Postal Code :) Foreign (Country :) | |
| | | |
| | | |
| | Building Name (If any) : | |
| | | |
| | | |
| ls the appli | cation made within 6 months from the death of the deceased? * | |
| - | Yes | |
| | No Why is the application made after the lapse of 6 months from the death of the deceased? | |
| | The delay in making the application was due to {state reason}. | |
| | | |
| | | |
| L | | |
| Are there | to be any limitations to the grant? * (Please ' tick ' one of the follow ing) | |
| | Limited until the beneficiary becomes of sound mind and obtains a grant to himself/herself | |
| | | |
| | Limited until the beneficiaries become of sound mind and obtain a grant to themselves | |
| | None | |
| | Others: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Limited to specific property | |
| | Deceased Properties * (1) Property : | |
| | | |
| | (2) Property : | |
| | | |
| | (3) Property: | |
| | (3) hoperty. | |
| | | |
| Applicant's | s Relationship to deceased & Capacity * | |
| (1st) | Applicant | |
| Name : * | | |
| | | |
| | Relationship to Deceased : * | |
| | | Relationship to Deceased Please refer to Table (1-20). |
| | If selected as "Others", please specify Other Relationship. | |
| | Applicant Capacity : * | Applicant Capacity Please refer to Table (1-21). |
| | | Fiease refer to Table (F21). |
| | If selected as "Others", please specify Other Capacity. | 1 |

- 1. How should I describe the "Applicant's relationship to deceased and capacity"? The descriptions are:
- a widow "the lawful widow" or, if the Deceased was of a religion allowing polygamy, as "the only lawful widow" or "one of the lawful widows"
- a husband "the lawful husband"
- a father "the lawful father and next-of-kin"
- a mother "the lawful mother and next-of-kin" or "the lawful mother and only next-of-kin"
- a child "the lawful and only child and only nextof-kin" or "one of the lawful children and nextof-kin"
- a brother or sister "the lawful brother" or "the lawful sister" and the brother or sister shall further be described as "one of the next-of-kin" or the "only next-of-kin"
- a nephew "the lawful nephew" and "one of the" or "only next-of-kin"
- a niece "the lawful niece" and "one of the" or "only next-of-kin"
- If a brother or sister is living and the Applicant is a nephew or niece who is the child of a brother or sister of the Deceased who died in the Deceased's lifetime, the Applicant shall be further described as "one of the persons entitled in distribution to the estate and effects of the deceased"
- a grandparent, grandchild, etc., shall be described as "lawful" and "one of the next-of-kin" or "only next-of-kin".

| (2nd) | Applicant | |
|---------------------|---|---|
| Name : * | | |
| | Relationship to Deceased : * | |
| | | Relationship to Deceased Please refer to Table (1-20). |
| | If selected as "Others", please specify Other Relationship. Applicant Capacity: * | |
| | rippioun opport. | Applicant Capacity Please refer to Table (1-21). |
| | If selected as "Others", please specify Other Capacity. | |
| (0-1) | A == 1 == = + | |
| (3rd) Name : * | Applicant | |
| | | |
| | Relationship to Deceased : * | |
| | If selected as "Others", please specify Other Relationship. | |
| | Applicant Capacity : * | |
| | | |
| | If selected as "Others", please specify Other Capacity. | |
| | s of Person(s) with Prior/ Equal Rights | |
| (1) | Name : * | |
| | | |
| | | |
| | Details Have prior/equal rights been cleared off? * | |
| | No How will prior rights be cleared off? * | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Yes How have the prior/equal rights been cleared off? * | |
| | Renounced | |
| | Others | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Date of clearance of prior/equal rights : (dd-mmm-yyy) | |
| | (| |

1. Who has prior right to apply for a grant?

- a. Generally, persons with a greater entitlement to the estate have prior right to apply for a grant.
- b. For non-Muslim estates, the spouse has prior right to apply for a grant.
- c. Please obtain the renunciations of persons with prior right to apply for a grant or make the application jointly with the persons with prior right.

| Details Reve prior/equal rights been cleared off?* Image: | Have prior/equal rights been cleared off?* Image: No image: How will prior rights be cleared off?* Image: Image: How have the prior/equal rights been cleared off?* Image: | 2) | Name : * | |
|--|--|-----------|---|---|
| Have prioriequal rights been cleared off?* No How will prior rights be cleared off?* Image: Second S | Have prior/equal rights been cleared off?* No How will prior rights be cleared off?* Vers Vers How have the prior/equal rights been cleared off?* Corbers Others Date of clearance of prior/equal rights : (d8-mmm.yyyy) refutures of Beneficiary(les) Name: * Gender: * Male Felationship to Deceased : * | | | |
| Have prioriequal rights been cleared off?* No How will prior rights be cleared off?* Image: Second S | Have prior/equal rights been cleared off?* No How will prior rights be cleared off?* Vers Vers How have the prior/equal rights been cleared off?* Corbers Others Date of clearance of prior/equal rights : (d8-mmm.yyyy) refutures of Beneficiary(les) Name: * Gender: * Male Felationship to Deceased : * | | | |
| Have prioriequal rights been cleared off?* No How will prior rights be cleared off?* Image: Second S | Have prior/equal rights been cleared off?* No How will prior rights be cleared off?* Vers Vers How have the prior/equal rights been cleared off?* Corbers Others Date of clearance of prior/equal rights : (d8-mmm.yyyy) refutures of Beneficiary(les) Name: * Gender: * Male Felationship to Deceased : * | | | |
| No How will prior rights be cleared off? * | No How will prior rights be cleared off?* | | | |
| Pres How have the prior/equal rights been cleared off?* Renounced Others Date of clearance of prior/equal rights : Date of clearance of prior/equal rights : (dd-mmm.yyy) | <pre>riticulars of Beneficiary(ies) 1) Name :* Gender : * Male : Female : Unknown Age or Date of Differs* ; flease specify Other Relationship. Beleforship to Deceased :* Selected as * Others* ; flease specify Other Relationship. Beleforship in the second secon</pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Pelationship to Deceased :* | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | No How will prior rights be cleared off? * | |
| Particulars of Beneficiary(ies) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Pelationship to Deceased :* | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Pelationship to Deceased :* | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Pelationship to Deceased :* | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Pelationship to Deceased :* | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Pelationship to Deceased :* | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Cender :* Male Female Unknown Age or Date of Birth :* Cender :* Belationship to Deceased :* Belationship to Deceased :* Belationship to Decea | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Pelationship to Deceased :* | <pre>rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* or (d5-mmm-yyy) Relationship to Deceased :* Fiselected as "Others", please specify Other Relationship. Minortly Interest </pre> | | | |
| Particulars of Beneficiary(ies) 1) Name :* Gender : * Male Female Unknown Age or Date of Birth :* or (dd-mmm-yyy) Relationship to Deceased :* | <pre>clip clip clip clip clip clip clip clip</pre> | | Yes How have the prior/equal rights been cleared off? * | |
| Particulars of Beneficiary(ies) 1) Name :* Gender : * Male Female Unknown Age or Date of Birth : * or (dd-mmm-yyy) Relationship to Deceased : * | | | Renounced | |
| (dd-mmm-yyy) Particulars of Beneficiary(les) 1 1 Gender : * Gender : * Male Female Unknown Age or Date of Birth : * or (dd-mmm-yyy) Relationship to Deceased : * | articulars of Beneficiary(ies) 1 1 Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | Others | |
| (dd-mmm-yyy) Particulars of Beneficiary(les) 1 1 Gender : * Gender : * Male Female Unknown Age or Date of Birth : * or (dd-mmm-yyy) Relationship to Deceased : * | articulars of Beneficiary(ies) 1 1 Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | | |
| (dd-mmm-yyy) Particulars of Beneficiary(les) 1) Name :* | articulars of Beneficiary(ies) 1 1 Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | | |
| (dd-mmm-yyy) Particulars of Beneficiary(les) 1 1 Gender : * Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyy) Relationship to Deceased : * | articulars of Beneficiary(ies) 1 1 Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | | |
| (dd-mmm-yyy) articulars of Beneficiary(les) 1 1 Gender : * Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyy) Relationship to Deceased : * | articulars of Beneficiary(ies) 1 1 Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | | |
| (dd-mmm-yyyy) articulars of Beneficiary(les) 1) Name : * Gender : * Male Gender : * Male Age or Date of Birth : * or (dd-mmm-yyyy) Relationship to Deceased : * | (dd-mmm-yyyy) articulars of Beneficiary(les) 1) Name : * Gender : * Male Gender : * Male Gender : * Male Female Unknown Age or Date of Birth : * or (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | | |
| (dd-mmm-yyy) articulars of Beneficiary(ies) 1 1 Gender : * Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyy) Relationship to Deceased : * | articulars of Beneficiary(ies) 1 1 Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | | |
| (dd-mmm-yyy) articulars of Beneficiary(les) 1 1 Gender : * Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyy) Relationship to Deceased : * | articulars of Beneficiary(ies) 1 1 Gender : * Male Female Unknown Age or Date of Birth : * (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Image: Minority Interest | | | |
| (dd-mmm-yyyy) articulars of Beneficiary(les) 1) Name : * Gender : * Male Gender : * Male Age or Date of Birth : * or (dd-mmm-yyyy) Relationship to Deceased : * | (dd-mmm-yyyy) articulars of Beneficiary(les) 1) Name : * Gender : * Male Gender : * Male Gender : * Male Female Unknown Age or Date of Birth : * or (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Imority Interest | | | |
| rticulars of Beneficiary(ies) 1) Name :* Gender :* Gender :* Male Female Unknown Age or Date of Birth :* Relationship to Deceased :* Relationship to Deceased :* Relationship to Deceased :* | rticulars of Beneficiary(les) 1) Name :* Gender :* Male Female Unknown Age or Date of Birth :* Relationship to Deceased :* Fi selected as "Others", please specify Other Relationship. Minority Interest | | | |
|) Name : * Gender : * Gender : * Relationship to Deceased : * Relationship to Deceased : * |) Name : * Gender : * Gender : * Male Female Unknown Age or Date of Birth : * Relationship to Deceased : * Fease refer to Table (1-20). Relationship Interest Minority Interest | | | |
| Name : * Gender : * Gender : * Age or Date of Birth : * Relationship to Deceased : * | 1) Name : * | rtioulara | of Ponoficiary/ico) | |
| Gender : * Aale Female Unknown Age or Date of Birth : * or (dd-mmm-yyy) Relationship to Deceased : * | Gender :* Male Female Unknown Age or Date of Birth : * or | | | |
| Age or Date of Birth : * or | Age or Date of Birth : * or | . , | | |
| Age or Date of Birth : * or | Age or Date of Birth : * or | | | |
| Age or Date of Birth : * or | Age or Date of Birth : * or | | | |
| (dd-mmm-yyyy) Relationship to Deceased : * Relationship to Deceased : | (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Minority Interest | | Gender : * Male Female Unknown | |
| (dd-mmm-yyyy) Relationship to Deceased : * Relationship to Deceased : | (dd-mmm-yyyy) Relationship to Deceased : * If selected as "Others", please specify Other Relationship. Minority Interest | | Are or Date of Dirth 1 * | |
| Relationship to Deceased | Relationship to Decessed Please refer to Table (+20). | | | |
| Relationship to Deceased Pices refer to Table (+20). | Presse refer to Table (1520). If selected as "Others", please specify Other Relationship. Minority Interest | | Relationship to Deceased : * | |
| | Minority Interest | | | Relationship to Deceased Please refer to Table (1-20). |
| If selected as "Others", please specify Other Relationship. | Minority Interest | | If selected as "Others", please specify Other Relationship. | |
| | | | | |
| | Lacks Mental Capacity | | | |
| Lacks Mental Capacity | | | Lacks Mental Capacity | |
| | Share Entitlement of Minor : * | | Share Entitlement of Minor : * | |
| | | | | 1 |

1. Who are the beneficiaries of the estate?

The beneficiaries of an estate are determined in accordance with the Intestate Succession Act (Cap. 146) (for non-Muslim estates) or in accordance with Muslim law (for Muslim estates).

2. Do I have to list persons who have already died as beneficiaries?

- a. The beneficiaries of an estate are determined as at the date of the death of the Deceased.
- b. A person who is entitled to inherit but who died before the Deceased should not be listed under the "Particulars of Beneficiaries" section. He should be listed in the "Particulars of Spouse and Other Next-of-kin Who Are Deceased" section. For non-Muslim estates, if this person is a child or sibling of the Deceased, please state whether he had children under "Any Other Relevant Information".
- c. A beneficiary who died after the deceased is to be listed in both the "Particulars of Beneficiaries" and "Particulars of Spouse and Other Next-of-kin Who Are Deceased" sections. His share will be given to his estate.

| (2) | Name : * |
|-------|---|
| | |
| | |
| | Gender : * Ale Female Unknown |
| | Age or Date of Birth : * or |
| | (dd-mmm-yyy) |
| | Relationship to Deceased : * |
| | |
| | If selected as "Others", please specify Other Relationship. |
| | Minority Interest |
| | Lacks Mental Capacity |
| | Share Entitlement of Minor : * |
| (2) | Name : * |
| (3) | Name : " |
| | |
| | |
| | Gender : * Male Female Unknown |
| | Age or Date of Birth : * or (dd-mmm-yyyy) |
| | Relationship to Deceased : * |
| | |
| | If selected as "Others", please specify Other Relationship. |
| | Minority Interest |
| | Lacks Mental Capacity |
| | Share Entitlement of Minor : * |
| | |
| (4) | Name : * |
| | |
| | |
| | Gender : * 🗌 Male 📄 Female 📄 Unknown |
| | Age or Date of Birth : * or |
| | (dd-mmm-yyyy) |
| | Relationship to Deceased : * |
| | If selected as "Others", please specify Other Relationship. |
| | Minority Interest |
| | |
| | Lacks Mental Capacity |
| | Share Entitlement of Minor : * |

| (1) | Name : * | |
|---|--|--|
| | | |
| | Gender : * All Female Unknown | |
| | Date of Death : * (dd-mmm-yyyy) | |
| | Relationship to Deceased : * | Relationship to Decease Please refer to Table (1-20). |
| | If selected as "Others", please specify Other Relationship. | |
| (2) | Name : * | |
| | | |
| | Gender : * Male Female Unknown | |
| | Date of Death : * (dd-mmm-yyyy) | |
| | Relationship to Deceased : * | |
| | If selected as "Others", please specify Other Relationship. | |
| | | |
| | | |
| Any Ot | her Relevant Information (if any) in support of the Originating Summons | |
| Any Otl | ner Relevant Information (if any) in support of the Originating Summons | |
| Any Otl | ner Relevant Information (if any) in support of the Originating Summons | |
| Any Oti | ner Relevant Information (if any) in support of the Originating Summons | |
| Any Oti | ner Relevant Information (if any) in support of the Originating Summons | |
| Any Oti | ner Relevant Information (if any) in support of the Originating Summons | |
| | ner Relevant Information (if any) in support of the Originating Summons | |
| cation | | |
| cation | | |
| cation 1st Cert | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of he captioned estate. | |
| cation 1st Cert | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of he captioned estate. A search of the Probate record of Caveats has been carried out and the follow ing Caveat(s) is/are found against the captioned estate: | |
| cation 1st Cert | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of he captioned estate. A search of the Probate record of Caveats has been carried out and the follow ing Caveat(s) is/are found | <u>Caveat Type</u> Either*CAVP* or*DCCV |
| cation 1st Cert | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of the captioned estate. A search of the Probate record of Caveats has been carried out and the follow ing Caveat(s) is/are found against the captioned estate: | <u>Caveat Type</u> Either "CAVP" or "DCCV |
| cation 1st Cert | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of the captioned estate. A search of the Probate record of Caveats has been carried out and the follow ing Caveat(s) is/are found against the captioned estate: (1) Caveat No.:* Court Forum Case Type Serial No. Year (2) Caveat No.:* / / / / / / / / / / / / / / / / / / / | <u>Caveat Type</u> Either "CAVP" or "DCCV |
| cation 1st Cert 1st Cert 2nd Cer | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of the captioned estate. A search of the Probate record of Caveats has been carried out and the follow ing Caveat(s) is/are found against the captioned estate: (1) Caveat No.:* Court Forum Case Type Serial No. Year (2) Caveat No.:* / / / / / / / / / / / / / / / / / / / | <u>Caveat Type</u> Either "CAVP" or "DCCV |
| | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of he captioned estate. A search of the Probate record of Caveats has been carried out and the follow ing Caveat(s) is/are found against the captioned estate: (1) Caveat No. :* / (2) Caveat | <u>Caveat Type</u> Either "CAVP" or "DCCV |
| | ification A search of the Probate record of Caveats has been carried out and there are no Caveats in respect of he captioned estate. A search of the Probate record of Caveats has been carried out and the follow ing Caveat(s) is/are found against the captioned estate: (1) Caveat No.:* Court Forum (2) Caveat No.:* / (3) Caveat No.:* / (4) Caveat No.:* / (5) Caveat No.:* / (2) Caveat No.:* / (3) Caveat No.:* / (4) Caveat No.:* / (5) Caveat No.:* / (4) Caveat No.:* / (5) Caveat No.:* / (5) Caveat No.:* / (5) Caveat No.:* / (6) Caveat No.:* / (7) Caveat No.:* / (6) Caveat No.:* / (7) Caveat No.:* / (6) Caveat No.:* / (7) Caveat No.:* / (8) | <mark>Caveat Type</mark> Either "CAVP" or "DCCV Probate Type Either "P" or "DCP". |

| Compose (Please complete the eform and *delete where inapplicable) | | | |
|--|--|--|--|
| EX-PARTE ORIGINATING SUMMONS (PROBATE) | | | |
| | | | |
| Let all parties concerned attend before the Court on the date and time to be assigned for the hearing of an application for the following orders: | | | |
| Editable 1. Letters of Administration to be granted to the Applicant(s). | | | |
| Letters of Administration to be granted to the Applicant(s) and [Names of Co-Administrator(s) separated by comma] as Co-Administrator(s). | | | |
| | | | |
| | | | |
| | | | |
| Editable 2. | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Editable | | | |
| THIS ORIGINATING SUMMONS is issued by the solicitor for the Applicant(s)* whose particulars is as follows: or THIS ORIGINATING SUMMONS is issued by the said Applicant(s)* whose address is as follows: | | | |
| | | | |
| Editable Solicitor(s) for the Applicant(s) / Applicant(s) * | | | |
| Law Firm / In-Person Name * Address * | | | |
| Tel No.: | | | |
| FaxNo.: Email: | | | |
| File Ref No.: | | | |
| Solicitor in charge: | | | |
| | | | |
| Note : | | | |
| Unless otherwise provided in any written law, the applicant must file a supporting affidavit or affidavits at the time of filing of the originating summons. | | | |
| | | | |
| Note : *Delete where happicable. eLitigation Release 1.0 - 18 Feb 201 | | | |

 What should I state in the Ex-parte Originating Summons if I am applying for letters of administration? For applications within the scope of thic

ror applications within the scope of this toolkit, please select "Letters of Administration to be granted to the Applicant(s)."