PAPUA NEW GUINEA
In the National Court of Justice

O.19, r.26 **Form 84.**

AFFIDAVIT OF APPLICANT FOR ADMINISTRATION WITH THE WILL ANNEXED

(As to heading, see O.19, r.3.)

On ..... 20....., I, ... (name, address and occupation) say on oath--

1. My full residential address is (state this).

2. The document, dated ..... (date) and signed in the margin by me and the person before whom this affidavit is sworn is, I believe, the last will of ..... (name), the deceased.

3. My means of identifying the will are ..... (state these).

4. The executor named in the will is ..... (name) and his full residential address is ..... (state this).

5. The attesting witnesses to the will are ..... (name) and ..... (name).

6. The deceased did (where applicable not) marry after the will was made. (If he did marry state particulars of the marriage.)

7. The deceased left an estate within the Independent State of Papua New Guinea.

8. (Where applicable) ..... (name), the executor named in the will, died on ..... (date).

9. (Where applicable) ..... (name), the executor named in the will, renounced probate of the will on ..... (date).

10. I am over 21 years of age.

11. I am not an undischarged bankrupt and I have not assigned or encumbered my interest in the estate.

12. The names and ages of the persons entitled to share in the estate are ..... (state these). (Where the names of all the persons entitled do not appear on the face of the will, state the facts showing that the persons named in this paragraph are entitled and that no other person is entitled.)

13. I am not aware of any claims against the estate (or as the case may be).

14. I believe that the estate is under the value of K..... (gross value).

Sworn at ..... }

before me ..... }