

**SUMMONS FOR [#PROBATE #ADMINISTRATION
#ADMINISTRATION WITH THE WILL ANNEXED #RESEAL]**

Delete every # option so that it says RESEAL

COURT DETAILS

Court	Supreme Court of New South Wales
Division	Equity
List	Probate
Registry	Sydney
Case number	Write the case number – you can find this on your published Notice of Intended Application - Reseal

TITLE OF PROCEEDINGS

Plaintiff	[name/s] Write the name of every person applying for reseal (for example, you and the other executors) The estate of [name of deceased] Write the full name of the deceased Late of: [suburb] Write the suburb where the deceased live [occupation] deceased Write the occupation of the deceased Date of death: [date] Write the date the deceased died Gross value: [gross value of the estate] Write the total value of all property owned by the deceased Net value: [net value of the estate] Write the total value of all property minus the total debts
-----------	--

FILING DETAILS

Filed for	[name/s] plaintiff[s] Write the name(s) of the person applying for reseal before the word plaintiff(s)
#Legal representative	[solicitor on record] [firm] Delete or leave this section blank if you do not have a lawyer
#Legal representative reference	[reference number] Delete or leave this section blank if you do not have a lawyer
Contact name and telephone	[name] [telephone] Write your name and telephone number if you do not have a lawyer
Contact email	[email address] Write your email address, if you have one

HEARING DETAILS

The summons is to be dealt with in the absence of the parties.

RELIEF CLAIMED

#Type of Grant being sought: [#Probate #Administration with the will annexed

Delete this section

#Administration]

Delete this section

#Reseal of grant of [type] write probate or administration or administration with the will annexed made by [other jurisdiction] write the name of the court and the state or country where the original grant was obtained

Then write one of the following paragraphs:

- If you are applying for reseal of probate from another jurisdiction, you should write:
The plaintiff (name of applicant or person acting as attorney) claims that probate of the will dated (date of will) of (name of deceased) late of (place and occupation of deceased) granted by (name of court) to (name of person probate was granted to) to be sealed with the seal of this Court.

- If you are applying for reseal of letters of administration with the will annexed, you should write:

The plaintiff (name of applicant or person acting as attorney) claims that administration of the estate of (name of deceased) late of (place and occupation of deceased) granted by (name of court) to (name of person letters of administration with the will annexed was granted to) be sealed with the seal of this Court.

- If you are applying for reseal of letters of administration, you should write:

The plaintiff (name of applicant or person acting as attorney) claims that administration of the estate of (name of deceased) late of (place and occupation of deceased) granted by (name of court) to (name of person the letters of administration was granted to) be sealed with the seal of this Court.

#Date of will #and codicils:

If the deceased had a will and a codicil, write the date here

Capacity of Applicant(s): #Executor(s) named in the will #A beneficiary named in the will (*if applying for administration with the will annexed*) #relationship to the deceased eg Widow,

De facto spouse (*if applying for administration*). #Attorney of (name) (*if applicable*) #[If appropriate specify if (other) executors predeceased the testator, renounced probate or are otherwise unable to apply]

Specify your capacity as the person applying for the summons and cross out any part that does not apply to you

#Qualifications or limitations on the grant:

Specify if there are any limitations on the grant. Delete this section if it does not apply

#That the administration bond be dispensed with.

Delete this section if it does not apply to you

SIGNATURE

#Signature of legal representative If you do not have a lawyer, either delete this section or leave it blank

#Signature of or on behalf of party if not legally represented Sign here if you are representing yourself

Capacity [eg plaintiff, solicitor on record, contact solicitor]
Specify what capacity you are signing as

Date of signature Write the date you signed the summons

[on separate page]

FURTHER DETAILS ABOUT PLAINTIFF**Plaintiff**

Name [Write your name here if you are the person applying for reseal of the grant. If there is more than one person applying, write all of their names and contact addresses](#)

Address [#\[unit/level number\] #\[building name\]](#)
 [The filing party must give the party's address.] [\[street number\] \[street name\] \[street type\]](#)
[\[suburb/city\] \[state/territory\] \[postcode\]](#)
[#\[country \(if not Australia\)\] \[Write your address details here\]\(#\)](#)

#Frequent user identifier [\[include if the plaintiff is a registered frequent user\]](#)
[Leave this section blank](#)

#Contact details for plaintiff acting in person

Address for service [#as above](#)
 [The filing party must give an address for service. This must be an address in NSW unless the exceptions listed in UCPR 4.5(3) apply. State "as above" if the filing party's address for service is the same as the filing party's address stated above.] [#\[unit/level number\] #\[building name\]](#)
[\[street number\] \[street name\] \[street type\]](#)
[\[suburb/city\] \[state/territory\] \[postcode\]](#)

Telephone [Write your telephone number here](#)

#Fax [Write your fax number here, if you have one](#)

Email [Write your email here, if you have one](#)

#Legal representative for plaintiff

[Delete or leave this section blank if you do not have a lawyer](#)

Name [\[name of solicitor on record\]](#)

Practising certificate number

Firm [\[name of firm\]](#)

#Contact solicitor [\[include name of contact solicitor if different to solicitor on record\]](#)

Address [#\[unit/level number\] #\[building name\]](#)
[\[street number\] \[street name\] \[street type\]](#)
[\[suburb/city\] \[state/territory\] \[postcode\]](#)

DX address

Telephone

Fax

Email

Electronic service address [\[#email address for electronic service eg service@emailaddress.com.au #Not applicable\]](#)