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| --- | --- | --- | --- | --- |
| **Renunciation** | |  | Court File Number | |
|  |  |  | {{estate.court\_file}} | |
| Estate Name | **{{deceased.name}}{% if deceased.aka\_name and deceased.aka\_name|length > 0 %} also known as {{deceased.aka\_name|merge(“a, b and c”)}}{% endif %}** | | | |
| Deponent | **{{party.full\_name}}** | | | |
| Address for Service and Contact Information for Party Filing this Document | Address   |  | | --- | | **{{firm\_name}}{% if firm\_name2 %}, {{firm\_name2}}{% endif %}**  **{{office.street}}** |   City or Town Province Postal Code   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **{{office.city}}** |  | **AB** |  | **{{office.postal}}** |   Phone Email Address   |  |  |  | | --- | --- | --- | | **{{lawyer.phone}}** |  | **{{lawyer.email}}** | | | | |
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**THE DEPONENT {%if party.swear\_affirm == “Swear” %}****{% else %}****{% endif %} SWEARS UNDER OATH OR {%if party.swear\_affirm == “Affirm” %}****{% else %}****{% endif %} AFFIRMS THAT THE INFORMATION IN THIS AFFIDAVIT IS WITHIN THE DEPONENT’S KNOWLEDGE AND IS TRUE. WHERE THE INFORMATION IS BASED ON ADVICE OR INFORMATION AND BELIEF, THIS IS STATED.**

1. I am a person that may apply to the Court of Queen’s Bench of Alberta for a grant under section 13(1) of the *Estate Administration Act* to administer the estate.

1. I do not wish to serve as the Deceased’s personal representative.
2. I renounce my entitlement to apply for a grant.
3. I have not intermeddled in the Deceased’s estate.

{{p ga\_jurat\_insert }}