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| --- | --- | --- | --- |
| **Reservation of Right to Apply for a Grant** | |  | 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 %}** |  |  |
|  | **Clerk’s Stamp** |
| 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. The Deceased, | **{{deceased.name}}** |

signed a will in which I am appointed as one of the personal representatives.

1. I wish the administration of the Deceased’s estate to proceed but I do not wish to administer the Deceased’s estate at this time.

1. I reserve the right to apply for a grant of double probate.
2. I consent to the issuance of a grant subject to my reservation.

{{p ga\_jurat\_insert }}