

FORM P5 (RULE 25-3 (2))

AFFIDAVIT OF APPLICANT FOR GRANT OF ADMINISTRATION WITHOUT WILL ANNEXED

**To complete the form electronically -**

Step 1: FILL in the blanks below ensuring that you answer each of the items.

Step 2 : PREVIEW - If you want to preview the form prior to printing click on the Preview and Sign button at the bottom of the page.

Step 3: PRINTING – to print the form click on the Print Form button at the bottom of the page or the print icon on the Adobe toolbar.

NOTE: All mandatory paragraphs will populate when form is previewed

To complete the form manually -

Click on the Preview Blank Copy button and then click either the Click here to PRINT form button or the print icon on the Adobe toolbar.

1.) Affidavit Information

Number	<input type="text"/>	(eg. 1st / 2nd / 3rd / etc)
Name of person swearing affidavit	<input type="text"/>	
Date	<input type="text"/>	(Date affidavit will be sworn) leave blank if unknown
Location	<input type="text"/>	

2.) File Information

Registry name	<input type="text"/>
File number	<input type="text"/> (File number is not required if initiating the file)

3.) Information about the Applicant

Name	<input type="text"/>
Address	<input type="text"/>
Occupation	<input type="text"/>
I am	<input type="text"/> the applicant

4.) Information about the Deceased *[Enter the legal name of the deceased]*

First name	<input type="text"/>
Middle names	<input type="text"/>
Last name	<input type="text"/>

5.) Priority of Applicants in an intestate estate

[Check one of the immediately following 6 boxes and provide the required information.]

- ☐ I am a person referred to in paragraph _____ of section 130 of the *Wills, Estates and Succession Act*.
[select (a), (b), (d), (e), (f) or (g)]
- ☐ I am a person nominated under paragraph _____ of section 130 of the *Wills, Estates and Succession Act*.
[select (a), (c) or (e.1)]
- ☐ My relationship to the deceased is _____.
[state your relationship]
- ☐ _____ is a person referred to in paragraph (g) of section 130 of the *Wills, Estates and Succession Act*. I am the _____ of _____
[Name of organization] [Organizational Title] [Name of organization]
- and I am authorized by the applicant to swear this affidavit on the applicant's behalf.
- ☐ _____ is a person nominated under paragraph _____
[Name of organization] [select (a), (c) or (e.1)]
- of section 130 of the *Wills, Estates and Succession Act*. I am the _____ of _____
[Organizational Title]
- _____ and I am authorized by the applicant to swear this affidavit on the
[Name of organization]
- applicant's behalf.
- ☐ _____'s relationship to the deceased is _____.
[Name of organization] [state the organizations's relationship]
- I am the _____ of _____ and I am authorized by the
[Organizational Title] [Name of organization]
- applicant to swear this affidavit on the applicant's behalf.

6.) Delivery

- ☐ I am not obliged under Rule 25-3 (11) to deliver a filed copy of this submission for estate grant to the Public Guardian and Trustee
- ☐ I am obliged under Rule 25-3 (11) to deliver a filed copy of this submission for estate grant to the Public Guardian and Trustee.

7.) Testamentary Document

- ☐ no testamentary document of the deceased has been found
- ☐ one or more testamentary documents have been found. A copy of the testamentary document(s) is/are attached as an exhibit to the affidavit. I believe that the testamentary document(s) is/are invalid or otherwise not relevant to this application for the following reasons:

8.) Information about the Grant [Check whichever one of the immediately following 3 boxes is correct and provide any required information.]

- ☐ I am not aware of there being any application for a grant of probate or administration, or any grant of probate or administration, or equivalent, having been issued, in relation to the deceased, in British Columbia or in any other jurisdiction.
- ☐ The following grant(s) of probate or administration, or equivalent, has/have been issued in relation to the deceased in British Columbia or in another jurisdiction:

I believe that that grant is/those grants are not relevant to this application for the following reasons:

[briefly state the reasons]

- ☐ The following person(s) has/have also applied for a grant of probate or administration:

[insert name(s) here]

9.) Additional information [if required, insert additional information in paragraph format below]

Add