

FORM P9 (RULE 25-3 (2))

AFFIDAVIT OF DELIVERY

**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
Commissioner's Location	<input type="text"/>	
Sworn or affirmed by video conference:	<input type="checkbox"/>	

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 Person that delivered the Documents

Name	<input type="text"/>
Address	<input type="text"/>
Occupation	<input type="text"/>
Documents Delivered along with the Notice of Proposed Application	<input type="text"/>

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.) Delivery of notice and other documents

☐ by mailing it/them to the following persons by ordinary mail:

Name(s)
On [date]

☐ by handing it/them to and leaving it/them with the following persons as follows:

Name(s)
On [date]

☐ by sending it/them to the following persons by e-mail, fax or other electronic means to that person

Name(s)
On [date]

[If you have checked the third of the immediately preceding 3 boxes, check both of the immediately following boxes. If you cannot check both of the immediately following boxes in relation to any person to whom the notice was sent by email, fax or other electronic means because he or she has not provided the required acknowledgement, you must re-deliver the notice and Rule 25-2 (1.1) documents by mail or personal delivery and swear to that delivery under the first or second of the boxes in this section 2.]

- ☐ Each of the persons who received delivery by e-mail, fax or other electronic means has, in writing, acknowledged receipt of the document(s) referred to in this section.
- ☐ I will retain a copy of those acknowledgements until the personal representative of the deceased is discharged and will produce those acknowledgements promptly after being requested to do so by the registrar.

6.) Delivery information

[Complete the following phrase for each person referred to in the section above who received delivery of the notice on behalf of another person under Rule 25-2(8), (10) or (12).]

I delivered the document(s) referred to in section 2 to
[Name]

in the person's capacity as the
[identify capacity, e.g. parent, guardian, committee, etc.]

of
[name of person to whom, under Rule 25-2(2), the document(s) referred to in section 2 was (were) required to be delivered and on whose behalf the person referred to in this section received delivery of the document(s)]

7.) Delivery to Public Guardian and Trustee (if applicable)

[check whichever one or more of the immediately following 3 boxes are correct]

- ☐ by mailing it/them to the Public Guardian and Trustee by ordinary mail.
- ☐ by handing it/them to and leaving it/them with the Public Guardian and Trustee.
- ☐ by sending it/them to the Public Guardian and Trustee by-mail, fax or other electronic means to that person.

8.) In accordance with Rule 25-2 (1.1)(b) *[name of person served]*

- ☐ No person who received notice demanded the will in its original electronic form.
- ☐ I provided the will or access to the will in its original electronic form to the following person(s)

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

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