

FORM 4

Instructions: use this form when the deceased did not leave a will.

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF _____, deceased.

(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)

AFFIDAVIT ON APPLICATION FOR

ADMINISTRATION WITHOUT WILL ANNEXED

I, _____, of the _____ of _____, in Nunavut, _____, (state your occupation), MAKE OATH AND SAY THAT:

1. _____ (state name and aliases of deceased), late of the _____ of _____, in Nunavut, _____ (state occupation), died on or about the ____ day of _____, 20____, at _____, and at the time of (his/her) death had (his/her) residence at the _____ of _____, in Nunavut (or, if residence was outside of Nunavut, add: "but had, at that time, property in Nunavut").
2. The deceased at the time of death was ____ years of age.

Instructions: fill in paragraph 3 to indicate whether the deceased was married, unmarried, widowed or divorced. Fill in paragraph 4 only if the deceased was living together with a person outside marriage (also known as a 'common-law relationship'). Fill in paragraph 4 even if the deceased was still legally married.

3. The deceased at the time of death was _____ (specify married, unmarried, widower, widow or divorced), and left (him/her) surviving: _____ (list the names, ages and addresses of spouse, children and other persons who are entitled to share in the estate and their relationship to the deceased, and state whether any of these persons are under the age of 19. Also state whether any of these persons who are 19 years of age or over are mentally or physically disabled and therefore cannot earn a livelihood and state the name of any committee appointed for the estate of these persons).
4. Immediately before (his/her) death, the deceased was living, outside marriage, with _____ (state the name, age and address of the person) and they had been cohabiting for a period of _____ (state the number of months or years). The deceased and _____ were together the natural or adoptive parents of _____ (list the name(s), age(s) and address(es) of the child(ren)).
5. The deceased was predeceased by _____ (for each predeceasing spouse, child or person who would have been entitled to a part of the estate, set out his/her name, date of birth, date of death and his/her relationship to the deceased).
6. The following persons are the persons entitled under the *Intestate Succession Act* _____ (state names, addresses and ages).
7. The following persons were dependants of the deceased as defined in the *Dependants Relief Act*: _____ (list names, ages and addresses of dependents).

8. The fair market value of the whole property of the deceased for which the grant of probate is requested is \$ _____, and full particulars of all the property are set out in the Schedule of Assets and Liabilities, which is attached and marked as Exhibit "A" to this affidavit. To the best of my knowledge, information and belief, all the debts and liabilities of the deceased as at the date of death are as set out in the attached Schedule of Assets and Liabilities.

9. I have made a careful search in all places where the deceased usually kept his (or *her*) papers and in his (or *her*) depositories in order to find out whether the deceased had or had not left any will, but have been unable to discover any will, codicil or testamentary paper.

10. I have attained the age of 19 years and I am _____ of the deceased and _____ (describe the relationship of the applicant to the deceased and state why others having a priority or equal right to apply, if any, are not applying).

11. I do solemnly swear that I will faithfully administer the property of the deceased according to law and shall render a full and true account of my executorship when lawfully required.

12. The beneficiaries entitled to share in the estate are listed in the Schedule of Beneficiaries, which is attached and marked as Exhibit "B" to this affidavit.

13. If the grant is issued to me, I will surrender the grant to the Nunavut Court of Justice whenever the Court requires me to do so.

14. To the best of my knowledge, information and belief, no other application for a grant for letters of administration or probate of a will of the deceased has been made.

SWORN BEFORE ME at

_____, in Nunavut,
(community)

on _____, 20__ .
(month, day)

A Commissioner for Oaths in and for
Nunavut*

My commission expires: _____

Print name: _____

Signature of person swearing affidavit

*If this document is sworn outside Nunavut, it must be sworn by a Notary Public.