

FORM 3

Instructions: use this form when no executor has been named in the will of the deceased.

**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 WITH 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").

Instructions: fill in paragraph 2 to indicate whether the deceased was married, unmarried, widowed or divorced. Fill in paragraph 3 only if the deceased was living together with a person outside marriage (also known as a 'common-law relationship'). Fill in paragraph 3 even if the deceased was still legally married.

2. 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).

3. 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)).

4. 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).

5. The following persons were dependants of the deceased as defined in the *Dependants Relief Act*:  
\_\_\_\_\_ (list names, ages and addresses of dependents).

6. 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 is 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.

7. I believe that the document (or documents) attached and marked as Exhibit "B" to this affidavit and marked by me with my signature, is the true and original last will (add, if applicable: " and codicil " or " and codicils") of the deceased.

8. The deceased was \_\_\_\_ years of age at the time the attached will was executed (*if the deceased was under the age of 19 years, state whether the deceased was or had been married, or whether the deceased was a member of the Canadian Armed Forces or was a mariner or seaman*) and the deceased did (or did not) marry since the execution of the will.

9. I have attained the age of 19 years.

10. I am a \_\_\_\_\_ (*state relationship of the applicant to the deceased*) of the deceased and \_\_\_\_\_ (*give name of executor*) \_\_\_\_\_ (*add as applicable: "is dead without having taken out probate", "has renounced all right to the probate of the will", "the deceased did not in his or her will name any executor" or as the fact is*). (*Also, 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. Neither \_\_\_\_\_ nor \_\_\_\_\_ (*list names of witnesses to the will*) is a beneficiary, or the spouse of a beneficiary, named in the attached will.

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

14. 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.

15. To the best of my knowledge, information and belief, no other application for a grant with respect to the attached will 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.