

FORM 2 SWORN STATEMENT - PROBATE

R. 2.2

**IN THE SUPREME COURT OF
THE REPUBLIC OF VANUATU
(CIVIL JURISDICTION)**

PROBATE CASE NO P____ OF ____

IN THE ESTATE OF

Deceased's name

SWORN STATEMENT

I, _____ of _____,
name of person making statement address and occupation

swear the following is true:

1. The document dated _____ signed in the margin by
date of will
me and by the person before whom this sworn statement is made is, I believe, the last will of
the deceased.

2. I am [the/an] executor named in the will and I have reached 18 years of age.

3. I believe the will has not been revoked.

4. I do not know of any other later will.

5. The will came into my possession _____.
state how will came into person's possession

6. The witnesses to the will are _____ and
name of first witness

name of second witness

[If there are other executors:]

7. The other executors named in the will are _____

[If all executors are not applying for probate:]

8. _____ are not applying for probate.
names of executors not applying

9. The deceased died on _____ .
date of death

10. I believe the deceased is _____ referred to in
name as in death certificate or other proof of death
the death certificate or other proof of death attached and marked "A".

- 11. The deceased did not marry after the will was made.
- 12. The deceased had reached 18 years of age when the will was made.
- 13. The deceased left property in Vanuatu.

OR

13. I believe the deceased was at the time of death domiciled in Vanuatu. I believe this because _____.
reasons for believing this

14. An inventory of all property of the deceased that I now know about is attached and marked "B". If I find out about any other property of the deceased I will tell the court about it.

15. The estate has an estimated gross value of VT _____ .
value of estate

16. If the Court grants probate to me I will administer the estate according to law and I will give a true account of my administration to the Court if it asks me to.

17. I realise that if I do not administer the estate according to law I may be liable to a fine or imprisonment.

SWORN by _____)
 _____)
 _____)
name of person making statement)

signature of person making statement

on _____
date

BEFORE ME

Signature of witness

Commissioner for Oaths OR Notary Public

ATTACHMENT B

Inventory of property of the estate of _____
name of deceased
of _____ deceased.
last address and occupation

DESCRIPTION

ESTIMATED OR KNOWN VALUE

Description sufficient to identify property

VT
amount

TOTAL VT
