$\underline{\textit{Instructions}} : \textit{use this form when an executor has been named in the will of the deceased}.$

IN THE NUNAVUT COURT OF JUSTICE

	IN THE E	STATE OF	, deceased.	
			names of the deceased in the fi her death certificate, and 3) an	
AFFIDAVIT ON A	APPLICATION FO	OR PROBATE		
I,	, of the	of	in Nunavut,	, (state
your occupation), N				
Nunavut, _	(state o	ccupation), died on o e of (his/her) death h	deceased), late of the	, 20, at
divorced. Fill in known as a 'con 2. The decedivorced), children ar and state w	n paragraph 3 only mmon-law relations eased at the time of and left (him/her) so and other persons whe whether any of these Dyears of age or ove	if the deceased was it hip'). Fill in paragra death was arviving: o are entitled to shaw persons are under the mentally or phore	deceased was married, unmar living together with a person of aph 3 even if the deceased was (specify married, unmarried(list the names, ages a re in the estate and their relation the age of 19. Also state whether assically disabled and therefore the estate of these persons).	utside marriage (also still legally married. ed, widower, widow or addresses of spouse, onship to the deceased, r any of these persons
(state the n	ame, age and addre	ess of the person) and	I was living, outside marriage, d they had been cohabiting for	a period of
together the			er years). The deceased and (list the ne	
a grant of programs of programs are grant of programs.	probate and state th	e person's address) l	who has priority to apply or an has (an equal (renounced his/her right a	right or priority) to the
would have		part of the estate, set	(for each predeceasing spe out his/her name, date of birth	
6. The follo		dependants of the dependants ages and addresses	eceased as defined in the Dependents).	ndants Relief Act:
\$which is at and belief,	, and full particul tached and marked	lars of all the propert as Exhibit "A" to thi bilities of the deceas	ne deceased for which the grant ty is set out in the Schedule of a s affidavit. To the best of my keed as at the date of death are as	Assets and Liabilities, nowledge, information

1	8. 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.
į	9. The deceased was years of age at the time that 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.
	10. I am the executor named in the attached will and have attained the age of 19 years.
	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), 20
((month, day)
A Comr Nunavu	missioner for Oaths in and for Signature of person swearing affidavit
	nmission expires:
Print na	

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