

FORM 74Z

THE KING'S BENCH

\_\_\_\_\_ Centre

**NOTICE OF APPLICATION TO PASS ACCOUNTS**

IN THE ESTATE OF \_\_\_\_\_  
*(name of deceased)*

(I/We), \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_,  
*(name(s) of applicant(s)* *(city/town)* *(province/territory)*

apply to pass accounts in this estate based on the following information:

1. THAT \_\_\_\_\_ died on or about \_\_\_\_\_.  
*(name of deceased)* *(date)*
2. THAT, on \_\_\_\_\_, (I was /we were)  
*(date probate or letters of administration was granted)*  
granted administration of the estate of the deceased.
3. THAT (I/we) have administered the estate and effects of the deceased to the best of their ability so far as the estate can be administered to \_\_\_\_\_.  
*(date)*
4. THAT (I/we) have filed true and correct accounts of the administration of the estate as required by law and verified by affidavit.
5. THAT (I/we) request that the accounts be audited and passed by this court.
6. (I/We) further request that (I/we) be allowed the sum of \$ \_\_\_\_\_ as a fair and reasonable allowance for the care, pains, trouble and time expended in administering, arranging and settling the affairs of the estate between \_\_\_\_\_  
*(date)*  
and \_\_\_\_\_.  
*(date)*
7. (I/We) have not been allowed compensation for services to the estate except \_\_\_\_\_.

8. (I/We) further request that \_\_\_\_\_, (my/our) lawyer, be allowed the sum of \$\_\_\_\_\_ as fees, and \$\_\_\_\_\_ as disbursements.

**OR**

8. (I/We) further request that this court fix a reasonable amount for the fees and disbursements of (my/our) lawyer, \_\_\_\_\_.

9. THAT the only persons interested in the estate are the following persons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(name(s) and address(es))*

10. THAT, of the persons mentioned in paragraph 9, the following persons are minors or are mentally incompetent and the name and address of the person's guardian of the person, guardian of the estate, committee or substitute decision maker for property is stated opposite the person's name:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Note: Identify the capacity in which the person serves. If no guardian has been appointed for a minor or, if no committee or substitute decision maker for a mentally incompetent person has been appointed, state "none appointed".)*

11. THAT (I/we) know of no creditors who have unsettled claims against the estate except \_\_\_\_\_.

12. THAT the only portion of the estate that remains unadministered is as set out in the accounts that are marked as Exhibit "E" to (my/our) affidavit. The reason for the non-administration is \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date