**THE KING'S BENCH**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Centre**

##### AFFIDAVIT IN SUPPORT OF A REQUEST TO

##### DISPENSE WITH BOND AND/OR SURETY

IN THE ESTATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I (We), \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Manitoba (severally) MAKE OATH AND SAY:

1. That (I/we) request that letters of administration be granted without (a bond/requiring sureties to the bond).
2. That (I/we) advise that ALL of the beneficiaries of this estate are adults capable of giving their consent, that their consent is filed herewith and that the particulars of such beneficiaries are as follows:

Name Address Kinship

1. That all funeral expenses have been paid and (there are no outstanding debts of the said deceased/the following expenses or debts of the estate are outstanding *(describe below)*).
2. That (I/we) request the Court of King’s Bench to accept (my/our) Request for Letters of Administration and to dispense with (surety to bond/bond and sureties).

(Severally) Sworn (or Affirmed) before me at the

\_\_\_\_\_\_\_\_\_\_\_ of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

in the Province of Manitoba,

this \_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature(s) of Applicant(s)

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

Commissioner for Oaths in and for the

Province of Manitoba

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(This is a precedent and may be modified as required)*

**THE KING'S BENCH**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Centre**

##### CONSENT TO ADMINISTRATION WAIVING

##### BOND AND/OR SURETY

IN THE ESTATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am the

 *(name of beneficiary) (city/town) (province/territory)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the deceased, who died intestate on or about \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, leaving

 *(relationship to deceased) (date of death)*

myself and my \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as the beneficiaries of the

 *(relationship to applicant) (name of applicant)*

estate of the deceased.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ consent to Letters of Administration being issued to the applicant as

 *(name of beneficiary)*

requested in the Request for Letters of Administration filed with the Court of King’s Bench without requiring any (surety to the bond/bond and sureties) given by them, with respect to the said Letters of Administration.

DATED at                                      ,                                      , this         day of                                     , 20      .

Signed in the Presence of

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

witness (Name of Beneficiary)

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

 (Name of Beneficiary)

NOTE: THIS IS A WITNESSED DOCUMENT, AND REQUIRES AN AFFIDAVIT OF EXECUTION.

*(This is a precedent and may be modified as required)*