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| FORM 74B |
| *Courts of Justice Act* |
| ONTARIO |
| **SUPERIOR COURT OF JUSTICE** |
| IN THE ESTATE OF *(insert name),* deceased. |

AFFIDAVIT OF SERVICE OF APPLICATION FOR A CERTIFICATE
OF APPOINTMENT OF ESTATE TRUSTEE

I, *(insert name),* of *(insert city or town and county or district of residence)*, make oath and say/affirm:

1. I am *(insert “applicant”, “lawyer for applicant”, etc.)* for a certificate of appointment of estate trustee *(insert either “with a Will” or “without a Will”)* in the above-noted estate.
2. I served an application for the following certificate: *(select one)*

[ ]  Certificate of Appointment of Estate Trustee with a Will

[ ]  Certificate of Appointment of Estate Trustee with a Will Limited to the Assets Referred to in the Will

[ ]  Certificate of Appointment of Estate Trustee without a Will

1. I served the above-noted Application on:
2. each person entitled to share in the distribution of the estate, including charities and contingent beneficiaries;
3. the Office of the Children’s Lawyer if any of the persons with an interest in the estate are under the age of 18 and a parent or guardian of those persons;
4. the Office of the Children’s Lawyer if any of the persons who may be entitled to an interest in the estate are unborn or unascertained; and
5. the Guardian or Attorney for any adults who meet the definition of “incapable” as set out in Part 6 of the Application form. If I wrote “None” in the Guardian or Attorney section of Part 6, I served on the Office of the Public Guardian and Trustee a copy of this Application form and a copy of the Will and any codicil(s) if there is a Will and any codicil(s).
6. The above-noted Application was served on each of the above persons by email, mail, courier or personal service in accordance with the *Rules of Civil Procedure*.

*(If applying without a Will,* ***delete*** *or* ***strike*** *paragraph 5.)*

1. I have attached or caused to be attached to each Application the following:
	1. an extract of the part or parts of the Will or codicil relating to the gift, or a copy of the Will (and codicil(s), if any), in the case of an application served on or in respect of a person entitled only to a specified item of property or stated or determinable amount of money,
	2. a copy of the Will (and codicil(s), if any), in the case of an application served or in respect of any other beneficiary,
	3. a copy of the Will (and codicil(s), if any) and a statement of the estimated value of the interest of a minor or an adult described in the application as lacking capacity, as the case may be, if that value is not disclosed in the application form, in the case of an application served on the Office of the Children’s Lawyer or the Office of the Public Guardian and Trustee.

*(If paragraph 6 does not apply,* ***delete*** *or* ***strike*** *it.)*

1. The following persons and charities specifically named in the Will are not entitled to be served for the reasons shown below:

|  |  |
| --- | --- |
| Name of person *(as it appears in Will, if any)* | Reason not served |
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*(If not applicable,* ***delete*** *or* ***strike*** *paragraph 7. Complete this section if the application has not been served on persons who are named in the Will or who are members of a class of beneficiaries under the Will or are entitled under an intestacy pursuant to the* Succession Law Reform Act.*)*

1. The following persons may be entitled to be served but have not been served for the reasons shown below:

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| --- | --- |
| Name of person *(as it appears in Will, if any)* | Reason not served |
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To the best of my knowledge and belief, subject to paragraph 7 (if applicable), the persons named in the application are all the persons who are entitled to share in the distribution of the estate.

*(If there is more than one deponent, attach a separate sheet for additional affidavits.)*

I MAKE OATH AND SAY (or AFFIRM) that the information contained in this affidavit of service is true, to the best of my knowledge and belief.

Sworn or Affirmed before me: [ ]  in person OR [ ]  by video conference

***Complete if affidavit is being sworn or affirmed in person:***

by *(insert name of deponent)* at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, on *(insert date)*.

*Use one of the following if affidavit is being sworn or affirmed by video conference:*

***Complete if deponent and commissioner are in same city or town:***

by *(insert name of deponent)* at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, before me on *(insert date)* in accordance with [O. Reg. 431/20](https://www.ontario.ca/laws/regulation/r20431), Administering Oath or Declaration Remotely.

***Complete if deponent and commissioner are not in same city or town:***

by *(insert name of deponent)* at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, before me at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, on *(insert date)* in accordance with [O. Reg. 431/20](https://www.ontario.ca/laws/regulation/r20431), Administering Oath or Declaration Remotely.

This *(insert date)* day of *(insert month)*, *(insert year)*.

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| Signature of Commissioner | Signature of Deponent |

RCP-E 74B (September 1, 2021)