

**JUDICATURE ACT**

R-004-2005

Registered with the Registrar of Regulations

2005-04-22

**PROBATE, ADMINISTRATION AND GUARDIANSHIP RULES OF THE SUPREME COURT OF THE NORTHWEST TERRITORIES, amendment**

The judges of the Nunavut Court of Justice, with the approval of the Commissioner, under section 59 of the *Judicature Act* and every enabling power, make the annexed amendments to the *Probate, Administration and Guardianship Rules of the Supreme Court of the Northwest Territories*, registered under the *Statutory Instruments Act* (Canada) as regulation numbered SOR/79-515, as duplicated for Nunavut by section 29 of the *Nunavut Act*.

**1. The *Probate, Administration and Guardianship Rules of the Supreme Court of the Northwest Territories*, registered under the *Statutory Instruments Act* (Canada) as regulation numbered SOR/79-515, as duplicated for Nunavut by section 29 of the *Nunavut Act*, are amended by these rules.**

**2. The title is repealed and the following is substituted:**

PROBATE AND ADMINISTRATION RULES OF THE NUNAVUT COURT OF JUSTICE

**3. Each provision listed in Column 1 of Schedule A is amended by striking out the word or words set out in the same row of Column 2 of Schedule A, wherever they appear, and by substituting the word or words, if any, set out in the same row of Column 3 of Schedule A.**

**4. Subrule 4(2) and rule 12 are repealed.**

**5. Rule 6 is amended by**

- (a) striking out the semi-colon at the end of paragraph (i) and substituting a period;  
and
- (b) repealing paragraphs (j) and (k).

**6. Subrule 24(d) and rule 28 are amended by striking out "*Ordinance*" wherever it appears and by substituting "*Act*".**

**7. Subrule 69(1) is amended by striking out "letters of administration and guardianship shall be signed in duplicate by the clerk" and by substituting "letters of administration shall be issued in duplicate".**

**8. Rules 80 to 82 are repealed and the following is substituted:**

80. The forms set out in Schedule I are prescribed for use under these rules.

**9. (1) Forms 15, 18, 20 to 23, 25 to 31 and 34 to 36 of Schedule I are amended by striking out "Supreme Court of the Northwest Territories" and by substituting "Nunavut Court of Justice".**

**(2) Forms 15, 18, 20 to 23, 25, 26, 28, 30, 34, 35 and 37 of Schedule I are amended by striking out "Northwest Territories" wherever it appears and by substituting "Nunavut".**

**(3) Forms 18, 26, 30 and 36 of Schedule I are amended by striking out "Supreme Court" and by substituting "Nunavut Court of Justice".**

**(4) Form 26 of Schedule I is amended by repealing the note at the end of the form.**

**10. (1) Forms 1 to 5, 8 to 14, 16, 17 and 32 of Schedule I are repealed and Forms 1 to 5, 8 to 14, 16, 17 and 32 as set out in Schedule B to these regulations are substituted.**

**(2) Forms 6, 7, 19, 24 and 33 of Schedule I are repealed.**

**11. Schedule II is repealed.**

**12. These rules come into force May 1, 2005.**

**SCHEDULE A**

<b>COLUMN 1 Provision Amended</b>	<b>COLUMN 2 Word or Words Struck Out</b>	<b>COLUMN 3 Word or Words Substituted</b>
<b>Rule 1, definition "administrator"</b>	", "guardian"	
<b>Rule 1, definitions "application" and "grant"</b>	", letters of guardianship"	
<b>Rule 1, definition "non-contentious business"</b>	", administration or guardianship"	" or administration"
<b>Rule 1, definition "property"</b>	"the Northwest Territories"	"Nunavut"
<b>Heading preceding rule 3</b>	", Administration and Guardianship"	"or Administration"
<b>Rule 3</b>	"Rules of Court"	"Rules of the Nunavut Court of Justice"
<b>Subrules 4(1) and 7(1)</b>	"the Territories"	"Nunavut"
<b>Subrule 8(1)</b>	", administration or guardianship"	" or administration"
<b>Subrule 8(1)(d)</b>	"at Yellowknife"	"in Nunavut"
<b>Subrule 10(3)</b>	"except for guardianship"	
<b>Rule 24</b>	"or of guardianship"	
<b>Rule 25</b>	"or guardianship"	
<b>Rule 27</b>	"an infant"	"a minor"
<b>Subrule 29(1)</b>	"the Northwest Territories"	"Nunavut"
<b>Subrules 29(1) and (4)</b>	"the Territories"	"Nunavut"
<b>Rule 33</b>	"at Yellowknife"	"in Nunavut"
<b>Rule 38</b>	"Yellowknife"	"Nunavut"
<b>Subrule 49(1)</b>	"infants"	"minors"
<b>Subrule 49(3)</b>	"Government of the Territories"	"Government of Nunavut"
<b>Subrule 60(3)</b>	"clerk of the Court of the Northwest Territories"	"clerk of the Nunavut Court of Justice"
<b>Rule 62</b>	", administration and guardianship"	"and administration"
<b>Rule 62</b>	"by the Director of Public Services"	
<b>Rule 62</b>	"and of guardians and infants"	
<b>Rules 64 and 65</b>	", administration or guardianship"	"or administration"
<b>Rule 67</b>	", administration, or guardianship,"	"or administration"
<b>Rule 68</b>	"and guardianship"	

<b>Rule 71</b>	"administration, probate or guardianship"	"probate or administration"
<b>Rule 71</b>	", letters of administration or guardianship"	"or letters of administration"
<b>Rule 73</b>	", administration or guardianship"	"or administration"
<b>Rule 73</b>	"Rules of Court"	"rules of the Court of Appeal"
<b>Rule 77</b>	", administration or guardianship"	"or administration"
<b>Rule 77</b>	"Rules of the Supreme Court"	"Rules of the Nunavut Court of Justice"
<b>Rule 79</b>	"Rules of Court"	"Rules of the Nunavut Court of Justice"

**SCHEDULE B**

**FORM 1**

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**APPLICATION FOR PROBATE OR ADMINISTRATION**

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut,  
\_\_\_\_\_ (*occupation of the applicant*), \_\_\_\_\_ (*state here in what capacity you are applying: "executor of the will" or "administrator of the estate"*), hereby request a grant for (*check off which is applicable*):

- Probate of the will (*add, if applicable: "with codicil" or "with codicils"*)
- Administration of the estate with will (*add, if applicable: "with codicil" or "with codicils"*) annexed
- Administration of the estate without will annexed

Dated on the \_\_\_ day of \_\_\_\_\_, 20\_\_.

Applicant: \_\_\_\_\_

Applicant's address: \_\_\_\_\_

Solicitor for the Applicant:  
\_\_\_\_\_

Solicitor's address: \_\_\_\_\_

Applicant's address for service in  
Nunavut: \_\_\_\_\_

FORM 2

*Instructions: use this form when an executor has been named in the will of the deceased.*

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**AFFIDAVIT ON APPLICATION FOR PROBATE**

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_ in Nunavut, \_\_\_\_\_, *(state your occupation)*, MAKE OATH AND SAY THAT:

1. \_\_\_\_\_ *(state name and aliases of deceased)*, late of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_ *(state occupation)*, died on or about the \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, and at the time of *(his/her)* death had *(his/her)* residence at the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut *(or, if residence was outside of Nunavut, add: "but had, at that time, property in Nunavut")*.

*Instructions: fill in paragraph 2 to indicate whether the deceased was married, unmarried, widowed or divorced. Fill in paragraph 3 only if the deceased was living together with a person outside marriage (also known as a 'common-law relationship'). Fill in paragraph 3 even if the deceased was still legally married.*

2. The deceased at the time of death was \_\_\_\_\_ *(specify married, unmarried, widower, widow or divorced)*, and left *(him/her)* surviving: \_\_\_\_\_ *(list the names, ages and addresses of spouse, children and other persons who are entitled to share in the estate and their relationship to the deceased, and state whether any of these persons are under the age of 19. Also state whether any of these persons who are 19 years of age or over are mentally or physically disabled and therefore cannot earn a livelihood and state the name of any committee appointed for the estate of these persons)*.

3. Immediately before *(his/her)* death, the deceased was living, outside marriage, with \_\_\_\_\_ *(state the name, age and address of the person)* and they had been cohabiting for a period of \_\_\_\_\_ *(state the number of months or years)*. The deceased and \_\_\_\_\_ were together the natural or adoptive parents of \_\_\_\_\_ *(list the name(s), age(s) and address(es) of the child(ren))*.

4. \_\_\_\_\_ *(if applicable, name the person who has priority to apply or an equal right to apply for a grant of probate and state the person's address)* has \_\_\_\_\_ *(an equal right or priority)* to the grant of probate and \_\_\_\_\_ has \_\_\_\_\_ *(renounced his/her right or consented to the application being made by me)*.

5. The deceased was predeceased by \_\_\_\_\_ (*for each predeceasing spouse, child or person who would have been entitled to a part of the estate, set out his/her name, date of birth, date of death and his/her relationship to the deceased*).

6. The following persons were dependants of the deceased as defined in the *Dependants Relief Act*: \_\_\_\_\_ (*list names, ages and addresses of dependents*).

7. The fair market value of the whole property of the deceased for which the grant of probate is requested is \$\_\_\_\_\_, and full particulars of all the property is set out in the Schedule of Assets and Liabilities, which is attached and marked as Exhibit "A" to this affidavit. To the best of my knowledge, information and belief, all the debts and liabilities of the deceased as at the date of death are as set out in the attached Schedule of Assets and Liabilities.

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.

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)*  
on \_\_\_\_\_, 20\_\_.  
    *(month, day)*

\_\_\_\_\_  
A Commissioner for Oaths in and for  
Nunavut\*  
My commission expires: \_\_\_\_\_  
Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

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



FORM 3

*Instructions: use this form when no executor has been named in the will of the deceased.*

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**AFFIDAVIT ON APPLICATION FOR ADMINISTRATION WITH WILL ANNEXED**

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_ in Nunavut,  
\_\_\_\_\_, *(state your occupation)*, MAKE OATH AND SAY THAT:

1. \_\_\_\_\_ *(state name and aliases of deceased)*, late of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_ *(state occupation)*, died on or about the \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, and at the time of *(his/her)* death had *(his/her)* residence at the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut *(or, if residence was outside of Nunavut, add: "but had, at that time, property in Nunavut")*.

*Instructions: fill in paragraph 2 to indicate whether the deceased was married, unmarried, widowed or divorced. Fill in paragraph 3 only if the deceased was living together with a person outside marriage (also known as a 'common-law relationship'). Fill in paragraph 3 even if the deceased was still legally married.*

2. The deceased at the time of death was \_\_\_\_\_ *(specify married, unmarried, widower, widow or divorced)*, and left *(him/her)* surviving: \_\_\_\_\_ *(list the names, ages and addresses of spouse, children and other persons who are entitled to share in the estate and their relationship to the deceased, and state whether any of these persons are under the age of 19. Also state whether any of these persons who are 19 years of age or over are mentally or physically disabled and therefore cannot earn a livelihood and state the name of any committee appointed for the estate of these persons)*.

3. Immediately before *(his/her)* death, the deceased was living, outside marriage, with \_\_\_\_\_ *(state the name, age and address of the person)* and they had been cohabiting for a period of \_\_\_\_\_ *(state the number of months or years)*. The deceased and \_\_\_\_\_ were together the natural or adoptive parents of \_\_\_\_\_ *(list the name(s), age(s) and address(es) of the child(ren))*.

4. The deceased was predeceased by \_\_\_\_\_ *(for each predeceasing spouse, child or person who would have been entitled to a part of the estate, set out his/her name, date of birth, date of death and his/her relationship to the deceased)*.

5. The following persons were dependants of the deceased as defined in the *Dependants Relief Act*: \_\_\_\_\_ (*list names, ages and addresses of dependents*).
6. The fair market value of the whole property of the deceased for which the grant of probate is requested is \$\_\_\_\_\_, and full particulars of all the property is set out in the Schedule of Assets and Liabilities, which is attached and marked as Exhibit "A" to this affidavit. To the best of my knowledge, information and belief, all the debts and liabilities of the deceased as at the date of death are as set out in the attached Schedule of Assets and Liabilities.
7. 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.
8. The deceased was \_\_\_\_ years of age at the time 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.
9. I have attained the age of 19 years.
10. I am a \_\_\_\_\_ (*state relationship of the applicant to the deceased*) of the deceased and \_\_\_\_\_ (*give name of executor*) \_\_\_\_\_ (*add as applicable: "is dead without having taken out probate", "has renounced all right to the probate of the will", "the deceased did not in his or her will name any executor" or as the fact is*). (*Also, state why others having a priority or equal right to apply, if any, are not applying*).
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)*  
on \_\_\_\_\_, 20\_\_.  
    *(month, day)*

\_\_\_\_\_  
A Commissioner for Oaths in and for  
Nunavut\*  
My commission expires: \_\_\_\_\_  
Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

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

FORM 4

*Instructions: use this form when the deceased did not leave a will.*

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**AFFIDAVIT ON APPLICATION FOR  
ADMINISTRATION WITHOUT WILL ANNEXED**

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut,  
\_\_\_\_\_, *(state your occupation)*, MAKE OATH AND SAY THAT:

1. \_\_\_\_\_ *(state name and aliases of deceased)*, late of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_ *(state occupation)*, died on or about the \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, and at the time of *(his/her)* death had *(his/her)* residence at the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut *(or, if residence was outside of Nunavut, add: "but had, at that time, property in Nunavut")*.
2. The deceased at the time of death was \_\_\_\_ years of age.

*Instructions: fill in paragraph 3 to indicate whether the deceased was married, unmarried, widowed or divorced. Fill in paragraph 4 only if the deceased was living together with a person outside marriage (also known as a 'common-law relationship'). Fill in paragraph 4 even if the deceased was still legally married.*

3. The deceased at the time of death was \_\_\_\_\_ *(specify married, unmarried, widower, widow or divorced)*, and left *(him/her)* surviving: \_\_\_\_\_ *(list the names, ages and addresses of spouse, children and other persons who are entitled to share in the estate and their relationship to the deceased, and state whether any of these persons are under the age of 19. Also state whether any of these persons who are 19 years of age or over are mentally or physically disabled and therefore cannot earn a livelihood and state the name of any committee appointed for the estate of these persons)*.
4. Immediately before *(his/her)* death, the deceased was living, outside marriage, with \_\_\_\_\_ *(state the name, age and address of the person)* and they had been cohabiting for a period of \_\_\_\_\_ *(state the number of months or years)*. The deceased and \_\_\_\_\_ were together the natural or adoptive parents of \_\_\_\_\_ *(list the name(s), age(s) and address(es) of the child(ren))*.

5. The deceased was predeceased by \_\_\_\_\_ (*for each predeceasing spouse, child or person who would have been entitled to a part of the estate, set out his/her name, date of birth, date of death and his/her relationship to the deceased*).
6. The following persons are the persons entitled under the *Intestate Succession Act* \_\_\_\_\_ (*state names, addresses and ages*).
7. The following persons were dependants of the deceased as defined in the *Dependants Relief Act*: \_\_\_\_\_ (*list names, ages and addresses of dependents*).
8. The fair market value of the whole property of the deceased for which the grant of probate is requested is \$\_\_\_\_\_, and full particulars of all the property are set out in the Schedule of Assets and Liabilities, which is attached and marked as Exhibit “A” to this affidavit. To the best of my knowledge, information and belief, all the debts and liabilities of the deceased as at the date of death are as set out in the attached Schedule of Assets and Liabilities.
9. I have made a careful search in all places where the deceased usually kept his (or *her*) papers and in his (or *her*) depositories in order to find out whether the deceased had or had not left any will, but have been unable to discover any will, codicil or testamentary paper.
10. I have attained the age of 19 years and I am \_\_\_\_\_ of the deceased and \_\_\_\_\_ (*describe the relationship of the applicant to the deceased and state why others having a priority or equal right to apply, if any, are not applying*).
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. The beneficiaries entitled to share in the estate are listed in the Schedule of Beneficiaries, which is attached and marked as Exhibit “B” to this affidavit.
13. 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.
14. To the best of my knowledge, information and belief, no other application for a grant for letters of administration or probate of a will of the deceased has been made.

SWORN BEFORE ME at

\_\_\_\_\_, in Nunavut,  
(community)

on \_\_\_\_\_, 20\_\_.

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

\_\_\_\_\_  
A Commissioner for Oaths in and for  
Nunavut\*

My commission expires: \_\_\_\_\_

Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

FORM 5

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**SCHEDULE B – SCHEDULE OF BENEFICIARIES  
EXHIBIT "B" TO THE AFFIDAVIT OF \_\_\_\_\_**

*Instructions:*

1. Provide details about the beneficiaries.
2. If the beneficiary is the next of kin of a predeceasing beneficiary, provide details including the name and date of death of the predeceasing beneficiary, and the relationship between the beneficiary and the predeceasing beneficiary.

Name of Beneficiary	Age, if under 19	Relationship to Deceased	Mailing Address	Portion of Estate to be Received	Deceased? <i>(indicate yes or no)</i>

This is Exhibit "B" (or "C") to the Affidavit of \_\_\_\_\_

SWORN BEFORE ME at  
\_\_\_\_\_, in Nunavut,  
*(community)*  
on \_\_\_\_\_, 20\_\_.  
*(month, day)*

\_\_\_\_\_  
A Commissioner for Oaths in and for  
Nunavut\*  
My commission expires: \_\_\_\_\_  
Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

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

FORM 8

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**SCHEDULE A – SCHEDULE OF ASSETS AND LIABILITIES  
EXHIBIT "A" TO THE AFFIDAVIT OF \_\_\_\_\_**

ASSETS

REAL ESTATE AND LEASEHOLD INTERESTS					
<i>Instructions: Describe real estate (land or buildings) and leasehold interests, including the building number and the legal description of the land.</i>					
Description	Market Value (a)		Total Encumbrances (b)		Net=a-b
1.					
2.					
SUBTOTAL					

MORTGAGES AND ENCUMBRANCES					
Description (Name of institution or person holding the mortgage or encumbrance)	Principal (a)		Interest (b)		Total =a+b (Enter in column b above)
1.					
2.					

CASH						
<i>Instructions: this includes cash, bank accounts, term and savings deposits, Guaranteed Investment Certificates and all items immediately convertible to cash.</i>						
Description of Investment					Principal	
1.						
2.						
SUBTOTAL						



<b>SECURITIES AND INVESTMENTS</b>						
<i>Instructions: this includes stocks, shares, bonds and mutual funds.</i>						
<b>Name of Company or Government (issuer of security or investment)</b>	<b>Type and Description</b>	<b>Unit Value</b>		<b>Number Held</b>	<b>Market Value</b>	
1.						
2.						
SUBTOTAL						
<b>Mortgages</b>						
<b>Description</b>	<b>Principal</b>		<b>Interest</b>		<b>Total</b>	
1.						
2.						
SUBTOTAL						
<b>Promissory Notes</b>						
<b>Description</b>	<b>Principal</b>		<b>Interest</b>		<b>Total</b>	
1.						
2.						
SUBTOTAL						

<b>LIFE INSURANCE PAYABLE TO ESTATE</b>							
<b>Name &amp; Address of Company (insurer)</b>	<b>Face Value</b>		<b>Accumulated Dividends or Interest</b>		<b>Loans</b>		<b>Value=a+b-c</b>
	<b>(a)</b>	<b>(b)</b>	<b>(c)</b>				
1.							
2.							
SUBTOTAL							

<b>ANNUITIES AND OTHER INTERESTS</b>					
<i>Instructions: give details of all annuities, RRSPs, pension benefits, savings plans, etc. that were purchased by the deceased or another, including benefits from other estates that remain or are payable to the estate.</i>					
Type and Description	Principal (a)		Interest (b)		Value=a+b
1.					
2.					
SUBTOTAL					

<b>PERSONAL PROPERTY</b>		
<i>Instructions: list and describe generally personal effects, household goods and furniture, jewelry, carvings and clothing. List and describe specifically if the value appears significant.</i>		
Description	Value	
1.		
2.		
SUBTOTAL		

<b>BUSINESS INTERESTS</b>		
<i>Instructions: give a brief inventory and statement of stock in trade and liabilities if the deceased had an interest in a sole proprietorship or partnership.</i>		
Description	Value	
1.		
2.		
SUBTOTAL		

<b>OTHER PROPERTY NOT INCLUDED ABOVE</b>		
Description	Value	
1.		
2.		
SUBTOTAL		

TOTAL ASSETS ..... \_\_\_\_\_

LIABILITIES

SCHEDULE OF DEBTS						
<i>Instructions: do not include mortgages and encumbrances on real estate or leasehold interests.</i>						
Description	Principal		Interest		Value=a+b	
	(a)		(b)			
1.						
2.						
3.						
4.						
SUBTOTAL						

**TOTAL LIABILITIES.....** \_\_\_\_\_  
 (=Subtotal of Schedule of Debts)

**NET VALUE OF ESTATE .....** \_\_\_\_\_  
 (Total Assets – Total Liabilities=Net Value of Estate)

This is Exhibit "A" to the affidavit of \_\_\_\_\_

SWORN BEFORE ME at  
 \_\_\_\_\_, in Nunavut,  
 (community)  
 on \_\_\_\_\_, 20\_\_.  
 (month, day)

\_\_\_\_\_  
 A Commissioner for Oaths in and for  
 Nunavut\*  
 My commission expires: \_\_\_\_\_  
 Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

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

FORM 9

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF \_\_\_\_\_, deceased.

(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)

AFFIDAVIT OF RENUNCIATION OF ADMINISTRATION

I, \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, MAKE OATH AND SAY THAT:

1. \_\_\_\_\_ late of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, died on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, being at the time of his (or her) death habitually resident in Nunavut, (if resident outside Nunavut add: "but had, at that time, property in Nunavut"), and had made his (or her) will on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, (add, if applicable: " and codicil" or "and codicils", and state when the codicil(s) was signed).
2. I am the \_\_\_\_\_ (state relationship) of the deceased.
3. I hereby give up all my right to a grant of letters of administration of the estate of the deceased.

SWORN BEFORE ME at \_\_\_\_\_, in Nunavut, (community) on \_\_\_\_\_, 20\_\_\_\_. (month, day)

\_\_\_\_\_  
A Commissioner for Oaths in and for Nunavut\*  
My commission expires: \_\_\_\_\_  
Print name: \_\_\_\_\_

\_\_\_\_\_  
Signature of person swearing affidavit

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

FORM 10

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF \_\_\_\_\_, deceased.

(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)

AFFIDAVIT OF RENUNCIATION OF PROBATE OR ADMINISTRATION WITH WILL ANNEXED

I, \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, MAKE OATH AND SAY THAT:

- 1. \_\_\_\_\_ late of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, died on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, being at the time of his (or her) death habitually resident in Nunavut, (if resident outside Nunavut add: "but had, at that time, property in Nunavut"), and had made his (or her) will on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, (add, if applicable: "and codicil" or "and codicils", and state when the codicil(s) was signed), and had appointed me as his Executor.
2. I have not interfered with the estate of the deceased, and will not hereafter interfere with it.
3. I am of the full age of 19 years.
4. I hereby give up all my right to the probate and execution of the will (add, if applicable: "and codicil" or "and codicils") of the deceased.

SWORN BEFORE ME at \_\_\_\_\_, in Nunavut, (community) on \_\_\_\_\_, 20\_\_\_\_. (month, day)

A Commissioner for Oaths in and for Nunavut\* My commission expires: \_\_\_\_\_ Print name: \_\_\_\_\_

Signature of person swearing affidavit

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

FORM 11

**Instructions:** this form is to be sworn by one of the witnesses who attested to the will of the deceased.

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

AFFIDAVIT OF EXECUTION OF WILL OR CODICIL

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_, *(state your occupation)*, MAKE OATH AND SAY THAT:

1. I knew \_\_\_\_\_ *(name of the deceased)*, late of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_ *(state the deceased's occupation)*, deceased.

**Instructions:** *If the testator signed the will or codicil himself or herself, use paragraph 2A in your affidavit and delete paragraph 2B. If a third party signed the will or codicil on behalf of the testator at the testator's request, use paragraph 2B in your affidavit and delete paragraph 2A.*

2A. On or about the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, I was personally present and did see the paper writing, which is attached and marked as Exhibit "A" to my Affidavit, signed by the testator, as his *(or her)* last will *(or "as a codicil to his or her last will")*, by signing his *(or her)* name *(or "by making his/her mark" or as the case may be)*, at the foot or end of the paper writing.

OR

2B. On or about the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, I was personally present and did see the paper writing, which is attached and marked as Exhibit "A" to my Affidavit, signed by a third party for and on behalf of the testator at his *(or her)* request, as and for his *(or her)* last will *(or "as a codicil to his or her last will")*, by signing the name of the testator in the presence of the testator, who was physically unable to sign his *(or her)* name or make his *(or her)* mark.

3. At the time the will *(or codicil)* was executed, the testator had attained the age of 19 years and, in my opinion, the testator was of sound mind, memory and understanding.

4. The will *(or codicil)* was executed by the testator in the presence of myself and \_\_\_\_\_ *(fill in the name of the other witness)*, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_ *(fill in the occupation of the other witness)*, and that we were both present at the same time. After the will *(or codicil)* was executed, \_\_\_\_\_

(fill in name of other witness) and I did, in the presence of the testator and of each other, attest and subscribe the will (or codicil) as witnesses.

*Instructions: If the testator made his or her mark, was blind or did not fully understand the language in which the will or codicil was written, use paragraph 5 in your affidavit.*

5. Before the will (or codicil) was executed by the testator, the will (or codicil) was explained to him (or her) by \_\_\_\_\_ (state the name of person who explained the will or codicil to the testator) in my presence, and the testator at that time appeared to perfectly understand it.

*Instructions: If erasures or irregularities appear on the face of the will or codicil or if the date of execution was omitted, use paragraph 6 in your affidavit.*

6. The paper writing that is attached as Exhibit "A" to my affidavit, bearing the date of \_\_\_\_\_, and purporting to be the last will (or "as a codicil to his or her last will") of the deceased, has been examined by me and I have particularly observed \_\_\_\_\_ (here, please state the various alterations, erasures and interlineations, if any, and the general plight and condition of the will or codicil, or any other matter, that must be accounted for), and I say that the will (or codicil) is now in all respects in the same condition as when it was signed by the deceased and the witnesses (or explain the differences if there are any).

SWORN BEFORE ME at \_\_\_\_\_, in Nunavut,  
(community)  
on \_\_\_\_\_, 20\_\_.  
(month, day)

\_\_\_\_\_  
A Commissioner for Oaths in and for  
Nunavut\*  
My commission expires: \_\_\_\_\_  
Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

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

FORM 12

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF \_\_\_\_\_, deceased.

(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)

**AFFIDAVIT PROVING EXECUTION OF A HOLOGRAPH WILL**

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_, (state your occupation), MAKE OATH AND SAY THAT:

1A. I knew the deceased in his (or her) lifetime and was personally present and did see the deceased write and sign with his (or her) own hand the paper writing that is attached and marked as Exhibit "A" to my Affidavit.

OR

1B. I knew the deceased for many years before and to the time of his (or her) death and that during that period I have frequently seen his (or her) write and also subscribe his (or her) name to documents so that I have become well acquainted with his (or her) handwriting. I have now carefully examined the paper writing that is attached and marked as Exhibit "A" to my Affidavit, which purports to be the last will of the deceased and bears the date of \_\_\_\_\_.

2. I believe the whole of the will, including the signature on it, to be of the true and proper handwriting of the deceased.

SWORN BEFORE ME at

\_\_\_\_\_, in Nunavut,

(community)

on \_\_\_\_\_, 20\_\_.

(month, day)

\_\_\_\_\_  
A Commissioner for Oaths in and for Nunavut\*

My commission expires: \_\_\_\_\_

Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

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



FORM 13

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF \_\_\_\_\_, deceased.

(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)

AFFIDAVIT VERIFYING TRANSLATION OF A WILL WRITTEN IN A LANGUAGE OTHER THAN THE ENGLISH OR FRENCH LANGUAGE

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, \_\_\_\_\_, (state your occupation), MAKE OATH AND SAY THAT:

1. I am familiar with the Inuktitut (or as the case may be) and English languages and can read, write and speak fluently in both these languages and am competent to translate documents from the Inuktitut (or as the case may be) language to the English language.

2. I have examined the paper writing that is attached and marked as Exhibit "A" to my Affidavit and that purports to be the original last will of \_\_\_\_\_, deceased, and I say that it is written in the Inuktitut (or as the case may be) language.

3. I have translated the will into the English language, which translation is attached and marked as Exhibit "B" to my Affidavit and I say that Exhibit "B" is a true and faithful translation of the will from the Inuktitut (or as the case may be) language to the English language.

SWORN BEFORE ME at

\_\_\_\_\_, in Nunavut,  
(community)

on \_\_\_\_\_, 20\_\_.  
(month, day)

\_\_\_\_\_  
A Commissioner for Oaths in and for  
Nunavut\*  
My commission expires: \_\_\_\_\_  
Print name: \_\_\_\_\_

\_\_\_\_\_  
Signature of person swearing affidavit

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

FORM 14

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

**(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)**

**GRANT OF PROBATE**

BE IT KNOWN THAT:

1. The Nunavut Court of Justice does hereby grant the administration of the property of \_\_\_\_\_, deceased, who died on or about the \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, and who at the time of his (or her) death had (his/her) residence at the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut (or, if his or her residence was outside Nunavut, add: "but had, at that time, property in Nunavut") to \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, who is the sole executor (or as the case may be) named in the last will of the deceased.

2. On the \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the last will (add, if applicable, "with codicil" or "with codicils") of the deceased was proved and filed in the Nunavut Court of Justice, a true copy of which will (add, if applicable, "and codicil" or "and codicils") is attached to this Grant.

3. \_\_\_\_\_ (fill in name of Executor) shall administer the estate of the deceased, which will include paying the just debts of the deceased and all taxes and duties payable in respect of his (or her) estate, distributing the legacies contained in the will (add, if applicable, "and codicil" or "and codicils") so far as the Executor is required to by law, and distributing the residue, if any, of the property according to law.

4. \_\_\_\_\_ (fill in name of Executor) shall exhibit under oath a true and perfect inventory of the property of the estate of the deceased, shall render a just and true account of the executorship, and shall surrender this grant whenever required by law to do so.

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*Judge of the Nunavut Court of Justice*

ENTERED this        day  
of                    , 20\_\_ .

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Clerk of the Nunavut Court of Justice

FORM 16

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**LETTERS OF ADMINISTRATION**

BE IT KNOWN THAT:

1. The Nunavut Court of Justice does hereby grant the administration of the property of \_\_\_\_\_, deceased, who died on or about the \_\_\_ day of \_\_\_\_\_, 20\_\_\_, intestate, and who at the time of his (or her) death had (his/her) residence at the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut (or, if his or her residence was outside Nunavut, add: “but had, at that time, property in Nunavut”) to \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, the lawful widow (or as the case may be) of the deceased.
2. \_\_\_\_\_ (fill in name of Administrator) is appointed Administrator to administer the estate of the deceased, which will include paying the just debts of the deceased and all taxes and duties payable in respect of his (or her) estate, distributing the legacies contained in the letters of administration so far as the Administrator is required to by law, and distributing the residue, if any, of the property according to law.
3. \_\_\_\_\_ (fill in name of Administrator) shall exhibit under oath a true and perfect inventory of the property of the estate of the deceased, shall render a just and true account of the administration, and shall surrender these letters of administration whenever required by law to do so.

\_\_\_\_\_  
*Judge of the Nunavut Court of Justice*

ENTERED this \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Clerk of the Nunavut Court of Justice

FORM 17

**IN THE NUNAVUT COURT OF JUSTICE**

IN THE ESTATE OF \_\_\_\_\_, deceased.

*(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)*

**LETTERS OF ADMINISTRATION WITH WILL ANNEXED**

BE IT KNOWN THAT:

1. The Nunavut Court of Justice does hereby grant the administration of the property of \_\_\_\_\_, deceased, who died on or about the \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and who at the time of his (*or her*) death had his (*or her*) residence at the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut (*or, if his or her residence was outside Nunavut, add: " but had, at that time, property in Nunavut"*) to \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, the lawful widow (*or as the case may be*) of the deceased.
2. On the \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the last will (*add, if applicable, "with codicil" or "with codicils"*) of the deceased was proved and filed in the Nunavut Court of Justice, a true copy of which will (*add, if applicable, "and codicil" or "and codicils"*) is attached to these Letters.
3. \_\_\_\_\_ (*fill in name of Administrator*) has been appointed Administrator to administer the estate of the deceased, which will include paying the just debts of the deceased and all taxes and duties payable in respect of (*his/her*) estate, distributing the legacies contained in the will (*or will and codicils*) so far as (*he/she*) is required to by law, and distributing the residue (*if any*) of the property according to law.
4. \_\_\_\_\_ (*fill in name of Administrator*) shall exhibit under oath a true and perfect inventory of the property of the estate of the deceased, shall render a just and true account of the administration, and shall surrender these letters of administration whenever required by law to do so.

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*Judge of the Nunavut Court of Justice*

ENTERED this        day  
of                    , 20\_\_ .

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Clerk of the Nunavut Court of Justice

FORM 32

IN THE NUNAVUT COURT OF JUSTICE

IN THE ESTATE OF \_\_\_\_\_, deceased.

(If the deceased was known under different names, state the names of the deceased in the following order: 1) name of deceased on his/her will, 2) name of the deceased on his/her death certificate, and 3) any other names of the deceased)

RELEASE

I, \_\_\_\_\_, of the \_\_\_\_\_ of \_\_\_\_\_, in Nunavut, MAKE OATH AND SAY THAT:

- 1. I have received from \_\_\_\_\_, the legal personal representative of the estate, a satisfactory accounting of my share of the estate.
- 2. I acknowledge payment to me of the sum of \$\_\_\_\_\_ and hereby release the legal representative of the estate, and his (or her) heirs, successors, executors, administrators and assigns, from all claims against the estate.
- 3. I am of the full age of 19 years.

SWORN BEFORE ME at

\_\_\_\_\_, in Nunavut,  
(community)  
on \_\_\_\_\_, 20\_\_.  
(month, day)

\_\_\_\_\_  
A Commissioner for Oaths in and for  
Nunavut\*  
My commission expires: \_\_\_\_\_  
Print name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of person swearing affidavit*

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