

**Form 16-12**  
(Subrule 16-12(2))

COURT FILE NUMBER \_\_\_\_\_

COURT OF QUEEN'S BENCH FOR SASKATCHEWAN

JUDICIAL CENTRE \_\_\_\_\_

IN THE ESTATE OF \_\_\_\_\_ DECEASED

**NOTICE**  
**TO: PUBLIC GUARDIAN AND TRUSTEE OR PROPERTY GUARDIAN**  
*(as the case may be)*

Take notice that \_\_\_\_\_

of \_\_\_\_\_  
*(mailing address)*

\_\_\_\_\_ *(telephone)*

\_\_\_\_\_ *(fax)*

\_\_\_\_\_ *(e-mail address)*

is making application to the court for grant of letters \_\_\_\_\_ in the estate of the deceased,

who died at \_\_\_\_\_  
*(place of death)*

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

And further take notice that the deceased died (in)testate, survived by:

the following competent adults entitled to share in the estate:

Name	Address	Relationship to deceased

the following persons under the age of 18 years entitled to share in the estate:

Name	Name and Address of Guardian	Relationship to deceased	Date of Birth

the following persons under the age of 18 years who may have a claim against the estate pursuant to *The Dependents' Relief Act, 1996*:

Name	Name and Address of Guardian	Relationship to deceased	Date of Birth

the following persons who are dependent adults as defined in *The Public Guardian and Trustee Act* and who are entitled to share in the estate:

Name	Name and Address of Guardian	Relationship to deceased	Date of Birth

the following persons who are dependent adults as defined in *The Public Guardian and Trustee Act* and who may have a claim against the estate pursuant to *The Dependents' Relief Act, 1996* or *The Family Property Act*:

Name	Name and Address of Guardian	Relationship to deceased	Date of Birth

And further take notice that the following are attached to this notice:

- (a) a statement of the assets of the deceased as shown on the application;
- (b) a statement of the debts of the estate; and
- (c) a copy of the Last Will and Testament of the deceased, if applicable.

DATED at \_\_\_\_\_, Saskatchewan, this \_\_\_\_\_ day of \_\_\_\_\_, 2 \_\_\_\_\_.

\_\_\_\_\_  
(signature)

**CONTACT INFORMATION AND ADDRESS FOR SERVICE**

**If prepared by a lawyer for the party:**

Name of firm: \_\_\_\_\_

Name of lawyer in charge of file: \_\_\_\_\_

Address of legal firm: \_\_\_\_\_  
*(set out the street address)*

Telephone number: \_\_\_\_\_

Fax number *(if any)*: \_\_\_\_\_

E-mail address *(if any)*: \_\_\_\_\_

*or*

**If the party is self-represented:**

Name of party: \_\_\_\_\_

Address for service: \_\_\_\_\_  
*(set out the street address)*

Telephone number: \_\_\_\_\_

Fax number *(if any)*: \_\_\_\_\_

E-mail address *(if any)*: \_\_\_\_\_