



APPLICATION FOR ADMINISTRATION

(to be used where there is no will)

PRIVACY ACT STATEMENT

This statement explains the purposes and use of your personal information. Only information needed to respond to program requirements will be requested. Collection and use of personal information is in accordance with the Privacy Act. In some cases, information may be disclosed without your consent pursuant to subsection 8(2) of the Privacy Act. The collection and use of your personal information for this Estates Program is authorized by the Indian Act, sections 42-51, http://laws-lois.justice.gc.ca/eng/acts/l-5/FullText.html and is required for your participation. We will use your personal information for: consideration of your application to administer an estate pursuant to section 43 of the Indian Act. The information collected is described in Personal Information Bank AANDC PPU105 detailed at http://www.aadnc-aandc.gc.ca/eng/1100100011039/1100100011040, will be retained for 30 years after the last administrative action and then records are transferred to Library and Archives Canada (LAC) to be stored as archival records. As stated in the Privacy Act, you have the right to access your personal information and request changes to incorrect information. Contact our office at 819-997-8277 to notify us about incorrect information. For more information on privacy issues and the Privacy Act in general, you can consult the Privacy Commissioners at 1 (800) 282-1376.

A. DETAILS OF THE DECEASED

Name \_\_\_\_\_, No. \_\_\_\_\_, of the \_\_\_\_\_ Band

ordinarily resident at \_\_\_\_\_ in the province of \_\_\_\_\_ town / reserve

Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

The following persons are entitled to share on an intestacy: when applicable include all siblings of the deceased; identify siblings who are deceased and their surviving children(children of the deceased may be eligible heirs); identify legally or custom-adopted individuals who may be eligible to be heirs. USE SEPARATE SHEET IF NECESSARY

Table with 5 columns: Name, Relationship, Band No., Date of Birth (Y, Y, M, M, D, D), Address

VALUE OF ESTATE (do not include insurance payable to a named beneficiary or the value of assets held in joint tenancy)

Personal Property \$ \_\_\_\_\_
Real Property on reserve \$ \_\_\_\_\_
Off-Reserve Real Property \$ \_\_\_\_\_
TOTAL VALUE OF ESTATE \$ \_\_\_\_\_

IF YOU ARE PROPOSING A NOMINEE TO ADMINISTER THE ESTATE, COMPLETE (INCLUDING SIGNATURE AND DATE) PART B AND HAVE YOUR NOMINEE COMPLETE PARTS C AND D OF THIS APPLICATION.

**B. NOMINATION OF ADMINISTRATOR BY HEIR**

We, \_\_\_\_\_  
do not wish to apply to administer the estate of \_\_\_\_\_ personally.  
Instead, we wish to nominate \_\_\_\_\_ to administer the estate.  
*name of nominee*

HEIR(S) SIGNATURES (identify relationship to deceased..eg. son, daughter, spouse)	DATE OF SIGNATURE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**C. AFFIDAVIT OF NOMINEE**

I, \_\_\_\_\_, a nominee of the above named heirs in this application  
*name of nominee*  
for appointment of administrator of the estate of \_\_\_\_\_ make oath and say:  
*name of deceased*

- 1. I am the nominee of the heirs, identified in Section "B", to the estate.
- 2. I have attained the age of majority.
- 3. I have made a careful search and inquiry for a will or other testamentary paper and none could be found and I believe that no will or testamentary paper was left by the deceased.
- 4. I will faithfully administer the property of the deceased according to law and render a just, full and true account of my administration when lawfully required.

Sworn before me at \_\_\_\_\_, in the Province of \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Commissioner for the taking of oaths	Nominee signature
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**D. DETAILS OF NOMINEE**

Occupation	Email address	Telephone No. (Office) ( )
Address		Telephone No. (Home) ( )
<b>FOR DEPARTMENTAL USE ONLY</b>		
I recommend that _____ be appointed administrator of the estate of _____ pursuant to section 43 of the <i>Indian Act</i> .		
The heirs of the deceased have nominated the appointment of _____ <i>name of proposed administrator</i> as the administrator of the estate of _____ and have been advised of the responsibility of the appointed administrator.		
<b>Check one only</b> <input type="checkbox"/> Attached are the objections received. <input type="checkbox"/> No objections have been received on the appointment.		
Estate Officer signature	Date	