SUPREME COURT OF QUEENSLAND

REGISTRY: *(Place)*

NUMBER:

In the [Will/Will and Codicil/Estate of] (*name of deceased including any aliases in which assets are held)* deceased

Last address: *(insert last address of deceased)*

[Address in will – if different]: *(insert address in will)*

**Affidavit of handwriting of deceased or attesting witness**

*(Full name of deponent)* of *(residential or business address)[[1]](#endnote-1)* states on oath [or: solemnly and sincerely affirms and declares]:

1. I knew and was well acquainted with the deceased [or name of attesting witness], who died on or about *(date)* at (*place*) for *(period of relationship)* before and down to the time of [his/her] death.
2. During that period I frequently saw [him/her] write and also sign his or her name [or had frequent communication with him or her by letter].
3. I have become well acquainted with [his/her] handwriting and signature.
4. I have carefully perused and inspected the document purporting to be and contain the last will of the deceased [*or* and to bear the signature of (*name of attesting witness*)], a clear copy of which is exhibit # to this affidavit.
5. I believe that the deceased’s signature as it appears on the will [or the signature of (*name of attesting witness)* as a witness attesting the execution of the will] is the true and proper handwriting and signature of the deceased [or *name of attesting witness*].

***If the affidavit extends over more than one page, at the foot of the first and every other page except the last:***

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|  |  |
| --- | --- |
| …………………………………………..  Deponent | …………………………………………..  Witness |

***At the end of the body of the affidavit:***

***[If this affidavit is being sworn in accordance with the Oaths Act 1867 requirements before a special witness (either remotely and/or using electronic signature/s) DO NOT USE the contents below. INSTEAD use Form 001A Special Witness Jurat for Uniform Civil Procedure Rules 1999 forms.] \****

***\*delete instructions***

|  |
| --- |
| **The contents of this affidavit are true, except where they are stated on the basis of information and belief, in which case they are true to the best of my knowledge.**  **I understand that a person who provides a false matter in an affidavit commits an offence.** |

|  |  |  |
| --- | --- | --- |
| **SWORN / AFFIRMED by**    …………………………………….  [insert full name of deponent]  at……………………………….  [insert place where deponent is located] | )  )  )  )  )  )  )  ) | …………………………………….  [signature of deponent]  …………………………………….  [date] |

|  |  |  |
| --- | --- | --- |
| **BEFORE ME:**  …………………………………….  [insert full name of witness]  …………………………………….  [insert type of witness][[2]](#endnote-2)  …………………………………….  [insert witness’s place of employment]\*[[3]](#endnote-3)  \**delete if not applicable* | )  )  )  )  )  )  )  )  )  )  )  ) | …………………………………….  [signature of witness]  …………………………………….  [date] |

[who certifies that the affidavit was read in the presence of the deponent who seemed to understand it, and signified that that person made the affidavit. (*If required: see R. 433(1)*]*.*

[who certifies that the affidavit was read in the presence of the deponent who seemed to understand it, and signified that that person made the affidavit, but was physically incapable of signing it. *(If required: see R.433(2)*]*.*

***The footnotes are to assist in the completion of this form and should be deleted once complete.***

1. If more than one deponent, continue with the name, address and description of each other deponent. [↑](#endnote-ref-1)
2. Insert the witness’s capacity that makes them eligible to witness the affidavit under s16A Oaths Act 1867. For example, lawyer, justice of the peace, commissioner for declarations [↑](#endnote-ref-2)
3. For example, the name of the law practice for the lawyer, the name of the government department of the government legal officer, the name of the law practice for a justice of the peace who witnesses documents for a law practice, etc [↑](#endnote-ref-3)