

**AFFIDAVIT IN PROOF OF DEATH**

**IN THE SUPREME COURT OF JUDICATURE OF JAMAICA  
IN PROBATE AND ADMINISTRATION**

SUIT NO.

IN THE ESTATE OF( INSERT THE NAME OF  
DECEASED) Late of (INSERT THE LAST  
KNOWN ADDRESS OF THE DECEASED,  
OCCUPATION deceased, intestate.

**I, (INSERT APPLICANT'S NAME) of (INSERT APPLICANT'S ADDRESS), (INSERT APPLICANT'S OCCUPATION), make oath and say as follows:-**

1. That **(INSERT THE NAME OF THE DECEASED)** late of (INSERT THE ADDRESS OF THE DECEASED), deceased died intestate on the (INSERT DATE OF DEATH) at (INSERT PLACE OF DEATH).
2. That I saw the body of my (INDICATE APPLICANT'S RELATIONSHIP TO THE DECEASED), (INSERT NAME OF DECEASED) the said deceased who died at (INSERT PLACE OF DEATH)
3. That I went to the funeral of the said deceased held at (INSERT PLACE OF BURIAL ) on (INSERT THE DATE OF BURIAL) and saw her body buried in (INDICATE WHERE THE BURIAL TOOK PLACE).
4. That checks at the Registrar General's Department have failed to produce a copy of the death Certificate.

SWORN to by the said )  
**LEBERT BROWN** ) \_\_\_\_\_  
at ) **LEBERT BROWN**  
in the Parish of )  
this day of 2012 )  
before me:- )

\_\_\_\_\_  
JUSTICE OF THE PEACE FOR THE PARISH OF:-

**Kleisha Rhoden Colley**, Attorney-at-Law c/o LAMP 16A Half Way Tree Road, Kingston 5, St. Andrew,  
Attorney-at-Law for the applicant herein whose address for service is that of their said Attorney-at-Law.