**WITNESS STATEMENT ON BEHALF OF AN EXECUTOR UNDER RULE 27 AND RULE 70.**

**IN THE ESTATE OF [NAME] née [maiden name] DECEASED**

I (full name) of (address) say as follows:

1. Unless otherwise stated (in which case I state the source of my belief), the facts and matters set out in this witness statement are within my own knowledge.
2. The above named deceased was born on [date of birth]. He/she died on [date of death]. A death certificate issued by (authority of place of death) is attached to this witness statement at Exhibit [ ].[[1]](#footnote-1)
3. The principal residence of the Deceased was [address of principal residence]. His/her nationality on death was [nationality].
4. I was appointed as an Executor under the Will of the Deceased (the ‘Will’) which was executed before an Authorised Officer and registered with the DIFC Wills and Probate Registry on [date].

*or*

[name of named Executor under the Will], the Deceased’s [specify relationship to the Deceased, eg husband, son etc] is the [sole/joint] Executor named under the Will of the Deceased (the ‘Will’) which was executed before an Authorised and registered with the DIFC Wills and Probate Registry on [date].

1. [Pursuant to a power of attorney executed on [date], I have been appointed as [name’s] lawful attorney for the purposes of applying for a Grant of Administration for his use and benefit pursuant to Rule 36 of the DIFC Wills and Probate Registry Rules (the ‘WPR Rules’). The aforesaid power of attorney is attached to this witness statement as Exhibit [ ]. I confirm that I am a Probate Practitioner as defined in the WPR Rules (as amended by the DIFC Wills and Probate Registry Practice Direction No.2 of 2016) and am entitled to apply for a Grant of Administration pursuant to Rule 36 thereof. I attach to this witness statement as Exhibit [ ] copies of [the front and rear of my Dubai Government Legal Affairs Department registration card/other] which evidences my status as a Probate Practitioner.]
2. I confirm that the information and facts provided in the Probate Application Form which I submitted to the DIFC Wills and Probate Registry on [date], are true and complete.
3. I confirm that I undertake to administer the Estate of the above named testator in accordance with (a) the Will which is attached to this witness statement as Exhibit [ ]; (b) the DIFC Wills and Probate Registry Rules and (c) the DIFC Court Rules (RDC) and I confirm that I submit to the jurisdiction of the DIFC Courts.

**I BELIEVE THAT THE FACTS STATED IN THIS WITNESS STATEMENT ARE TRUE.**

**SIGNED:**

**NAME: DATE:**

EXHIBIT [1]

DEATH CERTIFICATE - **IN THE ESTATE OF**

**[name] née [maiden name], DECEASED**

EXHIBIT [2]

POWER OF ATTORNEY - **IN THE ESTATE OF**

**[name] née [maiden name], DECEASED**

EXHIBIT [3]

LAD REGISTRATION CARD - **IN THE ESTATE OF**

**[name] née [maiden name], DECEASED**

EXHIBIT [4]

THE WILL - **IN THE ESTATE OF**

**[name] née [maiden name], DECEASED**

**WITNESS STATEMENT ON BEHALF OF A GUARDIAN UNDER RULE 86**

**IN THE ESTATE OF [NAME] née [maiden name] DECEASED**

I (full name) of (address) say as follows:

1. Unless otherwise stated (in which case I state the source of my belief), the facts and matters set out in this witness statement are within my own knowledge.
2. The above named deceased was born on [date of birth]. He/she died on [date of death]. A death certificate[[2]](#footnote-2) issued by (authority of place of death) is attached to this witness statement at Exhibit […].
3. I was appointed as a Guardian of the testator’s minor child(ren) in the event of his death (and the other parent predeceasing) under the Will executed before the Registrar and registered with the DIFC Wills and Probate Registry on [date]. I gave the undertakings required by Rule 10 of the DIFC Wills and Probate Registry Rules to the Registrar personally on [date]/by witness statement [dated].
4. I confirm that I assume (interim) parental responsibility of the above named child in accordance with the DIFC Wills and Probate Registry Rules, the DIFC Court Rules (RDC) and I confirm that I submit to the jurisdiction of the DIFC Courts.

**I BELIEVE THAT THE FACTS STATED IN THIS WITNESS STATEMENT ARE TRUE.**

**SIGNED:**

**NAME: DATE:**

1. In accordance with the Rule 27(3) of the WPR Rules, a Grant may be issued on the fact of death being otherwise proved to the satisfaction of the Director. [↑](#footnote-ref-1)
2. In accordance with the Rule 27(3) of the WPR Rules, a Grant may be issued on the fact of death being otherwise proved to the satisfaction of the Director. [↑](#footnote-ref-2)