

REPUBLIC OF ZAMBIA

IN THE HIGH COURT FOR ZAMBIA

DISTRICT REGISTRY AT _____

**IN THE MATTER OF: THE WILLS AND ADMINISTRATION OF TESTATE
ESTATES ACT, CHAPTER 60 OF THE LAWS OF ZAMBIA**

AND

**IN THE MATTER OF: THE ESTATE OF _____
(DECEASED)**

AFFIDAVIT IN SUPPORT OF TESTATE SUCCESSION

I, _____, of _____, in the
Republic of Zambia, make oath and state as follows:

1. PARTICULARS OF DEPONENT

1.1 I am an adult of sound mind, a Zambian citizen, and the (relationship to deceased: e.g.,
Executor / Beneficiary / Next of Kin) of the late _____,
deceased.

1.2 My National Registration Card (NRC) Number is _____.

2. PARTICULARS OF THE DECEASED

2.1 The deceased was known as _____, a Zambian national
resident at _____.

2.2 The deceased passed away on the _____ day of _____, 20, at
_____.

2.3 A copy of the certified Death Certificate is attached hereto.

3. LAST WILL AND TESTAMENT

3.1 The deceased left a valid Last Will and Testament dated the _____ day of _____, 20, which is annexed to this affidavit and marked “Annexure A”.

3.2 I confirm that the will has not been revoked or contested to the best of my knowledge.

4. BENEFICIARIES AND ESTATE DETAILS

4.1 The beneficiaries named in the will are as follows:

(a) Name: _____
NRC: _____
Relationship: _____
Contact: _____

(b) Name: _____
NRC: _____
Relationship: _____
Contact: _____

(Attach additional pages if needed.)

4.2 The estate comprises the following assets and property:

- _____
- _____
- _____

5. EXECUTOR / EXECUTRIX

5.1 The executor named in the will is:

Name: _____

NRC: _____

Address: _____

Contact Number: _____

5.2 I respectfully seek confirmation from this Honourable Court for the Grant of Probate in favour of the said executor to administer the estate of the deceased in accordance with the law and the intentions of the deceased.

6. DECLARATION

6.1 I swear that the contents of this affidavit are true and correct to the best of my knowledge and belief.

6.2 I make this affidavit to accompany an application for the Grant of Probate in respect of the estate of the late _____ pursuant to the provisions of the Wills and Administration of Testate Estates Act, Cap. 60 of the Laws of Zambia.

SWORN at _____

this _____ day of _____, 20.

DEPONENT

Name: _____

Signature: _____

BEFORE ME

Commissioner for Oaths

Name: _____

Title: _____

Date: _____

Stamp: _____