**Affidavit of Search for a Will**

**In the High Court of Justice of the Isle of Man**

**Testamentary Business**

**In the estate of** *(name of deceased)* ……………………………………………………………………………….. Deceased

of *(address of deceased)* …………………………………………………………………………………………………………………..

having died on the ………… day of ………………………………….. and having made and duly executed their

last Will and Testament [being undated], [being incompletely undated ……………………………………….],

(or as the case may be)………………………………………………………………………………………………………………

**Now I** *(name of deponent)* ………………………………………………………………………………………………………………

of *(address of deponent)* …………………………………………………………………………………………………………………..

make oath and say:

I am the appropriate person with sufficient knowledge of the deceased’s affairs and of their last Will

and Testament, a copy of the said Will dated as above, now produced to me and marked …..

Referring to the fact that the blank spaces originally left in the Will for the insertion of the day and

month of the date thereof have never been supplied [or that the Will is without date, or as the case

may be], I enter the following evidence to suggest that the Will may have been executed on

the ………… day of …………………………………..

or between the following two dates ………… day of …………………………………..

and the ………… day of …………………………………..

or in the month of ………………………………….. *(year)* …………

or the year …………

*(brief evidence for the above date(s) given)*

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I have made all possible searches and enquiries for any other Will including a thorough search of the

home of the deceased and of all places where it is likely they kept important papers or valuables. I

have been unable to discover any other Will, Codicil or Testamentary paper whatever except the said

Will mentioned above. I know of no other person, such as a solicitor or bank manager, who might

have kept papers for the deceased *[except (give details of any such persons and show that enquiries have been made*

*of them)]* …………………………………………………………………………………………………………………………………….

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I verily believe the deceased died without having left any Will, Codicil or Testamentary paper

whatever, other than the Will mentioned above.

Sworn by the said *(signature of deponent)* ………………………………………………………………………………………….

At *(address where swearing took place)* …………………………………………………………………………………………………

On the …………… day of ………………………………… *(month)* …………… *(year)*

In the presence of:

*(name of Commissioner for Oaths)* ………………………………………………………………………………………………………

*(signature of Commissioner for Oaths)* ………………………………………………………………………………………………….