**Affidavit of Due Execution**

**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 dated the ………… day of ……………………………………

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

of *(address of witness)* …………………………………………………………………………………………………………………..

as [one of the subscribing witnesses to the said Last Will and Testament] [one of the persons present

at the execution of the said last Will and Testament *(explanation as to why a subscribing witness is not making*

*the affidavit must be given below)*] make oath and say:

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

can account for the execution of the said last Will and Testament on the date given above, a copy

now produced to me and marked ….. bearing date the ………… day of ………………………………….. that

the said deceased executed the said Will [on the date stated therein] [(or, if the Will was dated in

error) on the ………… day of …………………………………..] by [signing their name] [making their mark]

at the foot or end thereof as the same now appears thereon in the presence of *(names of witnesses)*

…………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………

at the same time and that the witnesses then both attested the said Will in the presence of the said

deceased. *(if the witnesses are deceased or whose whereabouts despite enquiries cannot be traced please explain below;*

…………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………

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)* ………………………………………………………………………………………………….