

IN THE COURT OF THE SUB-REGISTRAR / DISTRICT REGISTRAR, [District/Tehsil Name]

Case No. _____ of 20____

IN THE MATTER OF:

Registration of the Will executed by Late Shri / Smt. _____ (deceased)

Applicant:

[Full Name of Applicant],
[Aged about ____ years],
[Son/Daughter of Shri _____],

[Residing at full address],

Beneficiary / Legal heir under the Will of Late Shri / Smt. _____

APPLICATION FOR REGISTRATION OF WILL AFTER DEATH OF TESTATOR

MOST RESPECTFULLY SHOWETH:

1. That the testator, Late Shri / Smt. _____, resident of _____, executed his/her last Will and testament dated _____ before attesting witnesses Shri _____ and Shri _____.
2. That the said Will was duly signed by the testator in the presence of both witnesses, who also signed in the presence of the testator, fulfilling all legal requirements under Section 63 of the Indian Succession Act, 1925.
3. That the testator expired on _____ at _____. The death certificate is annexed herewith as Annexure A.
4. That the said Will was not registered during the lifetime of the testator. The applicant now seeks registration of the Will under Section 40 of the Registration Act, 1908, as one of the beneficiaries and legal heirs of the deceased testator.
5. That both attesting witnesses to the said Will are alive and ready to appear before the Sub-Registrar for verification and attestation of the execution of the Will.

6. That there is no dispute regarding the genuineness of the said Will, and the applicant undertakes to produce all necessary documents and witnesses as may be required by this Hon'ble Authority.
7. That this application is made bona fide and in accordance with law, with the intent to ensure the lawful registration and preservation of the testamentary document.

PRAYER

The applicant, therefore, most respectfully prays that this Hon'ble Authority may kindly be pleased to:

- a) Register the Will executed by Late Shri / Smt. _____ dated _____ under Section 40 of the Registration Act, 1908; and
- b) Pass such other or further orders as may be deemed fit and proper in the interest of justice.

Place: _____

Date: _____

(Signature of the Applicant)

Name: _____

Address: _____

Phone: _____

Through Counsel:

Name: _____

Advocate

Chamber No. _____

[Address]