

**IN THE SUPREME COURT OF NEWFOUNDLAND AND LABRADOR  
GENERAL DIVISION**

In the Estate of \_\_\_\_\_ (mentally disabled person) of \_\_\_\_\_  
(city) in the Province of Newfoundland and Labrador, \_\_\_\_\_  
(occupation).

PETITION FOR GUARDIANSHIP UNDER THE  
MENTALLY DISABLED PERSONS' ESTATES ACT

TO THE SUPREME COURT OF NEWFOUNDLAND AND LABRADOR, GENERAL  
DIVISION, OR ONE OF THE HONOURABLE JUDGES THEREOF

The Petition of \_\_\_\_\_ (applicant), of \_\_\_\_\_  
(city/town), in the Province of Newfoundland and Labrador and \_\_\_\_\_  
(second applicant), of \_\_\_\_\_ (city/town), in the Province of  
Newfoundland and Labrador, says that:

1. \_\_\_\_\_ (name of mentally disabled person), is currently a resident of  
\_\_\_\_\_ (city/town), in the Province of Newfoundland and Labrador,  
and is \_\_\_\_\_ (relationship to applicants)
2. The said \_\_\_\_\_ (mentally disabled person) is a person who, because of a  
condition of arrested or incomplete development of mind (whether arising from inherent  
causes or induced by disease or injury) or a disorder of the mind, requires care, supervision  
and control for the protection of his/her property. [For applications under s. 3 of the *Mentally  
Disabled Persons' Estates Act.*]

**OR**

The said \_\_\_\_\_ (mentally disabled person) is a person who, through mental  
infirmity arising from disease, age, habitual drunkenness, the use of drugs or other cause, is  
incapable of managing his or her affairs. [For applications under s. 17 of the *Mentally Disabled  
Persons' Estates Act.*]

3. The said \_\_\_\_\_ (mentally disabled person), is currently residing at, \_\_\_\_\_ (current residence) in the Province of Newfoundland and Labrador, however, we are handling \_\_\_\_\_ (assistance being provided to person), for our \_\_\_\_\_ (relationship of person to petitioners).
4. Attached hereto and marked Schedule "A" is the Affidavit of \_\_\_\_\_ (name of physician), of \_\_\_\_\_ (city/town), in the Province of Newfoundland and Labrador, \_\_\_\_\_ (type of physician), wherein the said \_\_\_\_\_ (name of physician) deposes that the said \_\_\_\_\_ (name of mentally disabled person), is incapable of managing \_\_\_\_ (his/her) own affairs and that it is unlikely \_\_\_\_ (he/she) will ever be able to manage \_\_\_\_ (his/her) own affairs in the future.
5. That the said \_\_\_\_\_ (name of mentally disabled person) has the following next of kin and no others, namely:
  - (a) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town), in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship), age \_\_\_\_ years;
  - (b) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town), in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship), age \_\_\_\_ years;
  - (c) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town), in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship), age \_\_\_\_ years;
  - (d) \_\_\_\_\_ (name of next to kin), of \_\_\_\_\_ (city/town), in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship), age \_\_\_\_ years;
  - (e) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town), in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship), age \_\_\_\_ years;

6. That the following person(s) reside within the jurisdiction and \_\_\_\_ (is/are) entitled either in priority or have an equal right with the Petitioners to a grant of Letters of Guardianship under the Mnetally Disabled Persons’ Estates Act and have consented to the said appointment, which Consents are annexed hereto:

- (a) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town),  
in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship),  
age \_\_\_\_\_ years;
- (b) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town),  
in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship),  
age \_\_\_\_\_ years;
- (c) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town),  
in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship),  
age \_\_\_\_\_ years;
- (d) \_\_\_\_\_ (name of next to kin), of \_\_\_\_\_ (city/town),  
in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship),  
age \_\_\_\_\_ years;
- (e) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town),  
in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship),  
age \_\_\_\_\_ years;
- (f) \_\_\_\_\_ (name of next of kin), of \_\_\_\_\_ (city/town),  
in the Province of \_\_\_\_\_ (province), \_\_\_\_\_ (relationship),  
age \_\_\_\_\_ years;

7. That at the date of this Petition, the said \_\_\_\_\_  
(name of mentally disabled person) was possessed of property within the jurisdiction of this Honourable Court of an approximate value of \_\_\_\_\_ (dollar value of property). That the paper-writing hereto annexed and marked “B” is a true and correct Inventory and Valuation of the estate and effects of the said \_\_\_\_\_ (name of mentally disabled person) so far as your Petitioners can at present ascertain.

8. No Letters of Guardianship of the Estate and Effects of the said \_\_\_\_\_  
(name of mentally disabled person) have been applied for or granted to any person.

The Petitioners therefore apply for a grant of Letters of Guardianship of the Estate of the said  
\_\_\_\_\_ (name of mentally disabled person) to be issued to the Petitioners,  
pursuant to the *Mentally Disabled Persons' Estates Act*, R.S.N. 1990, c. M-10.

Dated at \_\_\_\_\_ (city/town) in the Province of Newfoundland and Labrador  
this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (d-m-y)

\_\_\_\_\_  
**Name of Petitioner**