

## **Representative Capacity Declaration**

1.	Pursuant to my obligations under subregulation 10.1.4(a), please be advised that I have been appointed to act in a representative capacity (choose one):
	the personal representative, executor or administrator, or one of the personal representatives, executors or administrators, of the estate of a deceased person
	a trustee, or one of the trustees, of a trust under an appointment made pursuant to a trust instrument creating the trust
	a trustee, or one of the trustees, of the property of another person under an appointment by a court
	an attorney, or one of the attorneys, of a person under a power of attorney
2.	I confirm that all money that I receive while acting in a representative capacity must not be paid into my law firm's trust account but must be paid into a separate trustee account that has been established for that purpose.
3.	I confirm that I will:
	<ul> <li>(a) maintain a record of all particulars relating to the lawyer's appointment to act in a representative capacity and a list of the beneficiaries of the estate or trust, together with their last known addresses;</li> </ul>
	(b) maintain the books, records, accounts and documentation of the estate or trust are in a form sufficient to accommodate an examination, review, audit or investigation ordered by the Executive Director or Complaints Investigation Committee; and
	<ul><li>(c) cooperate with the Society's auditor or investigator in the conduct of any examination, review, audit or investigation so ordered</li></ul>
4.	I confirm that I have provided notice in writing to the beneficiaries of the trust and, where possible, the party making the appointment that the Lawyers' Insurance Association of Nova Scotia and the Lawyers' Fund for Client Compensation Fund may not respond to claims in relation to the lawyer's handling of any money or property of the estate or trust.
	Date of appointment:
	Name of Lawyer:
	Signature of Lawyer: