|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| FORM 3 | | | | | | | | | | |
| AFFIDAVIT OF WITNESS | | | | | | | | | | |
| *Estates Administration Act* | | | | | | | | | | |
| I, |  | | | | , of the | |  | | | of |
|  | (full name of deponent) | | | |  | | (city, town, etc.) | | |  |
|  | | | | | | , make oath and say (or affirm) that I am well | | | | |
| acquainted with | |  | | | | | | named in the Certificate of Withdrawal | | |
| (Form 2); that I was present and did see the said Certificate of Withdrawal (Form 2) signed by the said | | | | | | | | | | |
|  | | | | ; that I am a subscribing witness to the said certificate, | | | | | | |
| and that I believe the said | | |  | | | | | | is the person who registered | |
| the caution referred to in the said certificate. | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Sworn/Affirmed before me (select one): | | | | | | | | |  | | | in person **OR** | | | | | | | | | | | | | |  | | | | by video conference | | | |
| Complete if affidavit is being sworn or affirmed in person: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| at the | | | | |  | of |  | | | | | | | | | | | | | , in the | | | | | | |  | | | | | | |
|  | | | | | (city, town, etc.) |  |  | | | | | | | | | | | | |  | | | | | | | (County, Regional Municipality, etc.) | | | | | | |
| of | |  | | | | | | , on | |  | | | | | | | | | | | | | | | | | | | | | . | | |
|  | |  | | | | | |  | | (date) | | | | | | | | | | | | | | | | | | | | |  | | |
|  | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | |
| Signature of Commissioner (or as may be) | | | | | | | | | | |  | | Signature of Deponent | | | | | | | | | | | | | | | | | | | | |
| **Use one of the following if affidavit is being sworn or affirmed by video conference:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Complete if deponent and commissioner are in same city or town: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| by | | |  | | | | | | | | | | | | | | | | | | at the | | | | | | |  | | | | | |
|  | | | (deponent’s name) | | | | | | | | | | | | | | | | | |  | | | | | | | (city, town, etc.) | | | | | |
| of |  | | | | | | | | | | | | | | | | , in the | | | | | |  | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | |  | | | | | | (County, Regional Municipality, etc.) | | | | | | | | | | |
| of |  | | | | | | | , before me on | | | | | | |  | | | | | | | | | | | | | | | | | in accordance with | |
|  |  | | | | | | |  | | | | | | | (date) | | | | | | | | | | | | | | | | |  | |
| [O. Reg. 431/20](https://www.ontario.ca/laws/regulation/r20431), Administering Oath or Declaration Remotely. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Commissioner for Taking Affidavits (or as may be) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | |
| Signature of Commissioner (or as may be) | | | | | | | | | | |  | | | Signature of Deponent | | | | | | | | | | | | | | | | | | | |
| Complete if deponent and commissioner are not in same city or town: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| by | | | |  | | | | | | | | | | | | | | | | | | at the | | | | | | |  | | | | |
|  | | | | (deponent’s name) | | | | | | | | | | | | | | | | | |  | | | | | | | (city, town, etc.) | | | | |
| of | | | |  | | | | | | | | | | | | | | | , in the | | | | | |  | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | |  | | | | | | (County, Regional Municipality, etc.) | | | | | | | | |
| of | | | |  | | | | | | | | | | , before me at the | | | | | | | | | | | | | | |  | | | | |
|  | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | (city, town, etc.) | | | | |
| of | | | |  | | | | | | | | | | | | | | , in the | | | | | |  | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | |  | | | | | | (County, Regional Municipality, etc.) | | | | | | | | | |
| of | | | |  | | | | | | | | | , on | | |  | | | | | | | | | | | | | | | | | in accordance with |
|  | | | | | | | | | | | | |  | | | (date) | | | | | | | | | | | | | | | | |  |
| [O. Reg. 431/20](https://www.ontario.ca/laws/regulation/r20431), Administering Oath or Declaration Remotely. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Commissioner for Taking Affidavits (or as may be) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | |
| Signature of Commissioner (or as may be) | | | | | | | | | | |  | | | Signature of Deponent | | | | | | | | | | | | | | | | | | | |