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| *ONTARIO* | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Superior Court of Justice** | | | | | | | | | | | | | | | | Affidavit for Jurisdiction | | | | | | | | | | |
|  | | | | | | | | | | Form 11A Ont. Reg. No*.*: 258/98 | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | | | | | | | | |  | |  | |
| Small Claims Court | | | | | | | | | | | | |  | | Claim No. | |
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|  | |
| Address | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |  | |
|  | | | | | | | | | | Phone number | | | | | | | | | | | | |  | |
| **BETWEEN** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plaintiff(s) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **and** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Defendant(s) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **My name is** | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | (Full name) | | | | | | | | | | | | | | | | | | | |
| **I live in** | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | (Municipality & province) | | | | | | | | | | | | | | | | | | | | |
| **and I swear/affirm that the following is true:** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.** | In this action, I am the | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | plaintiff | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | representative of the plaintiff(s) | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | |  | | | | | | | | (Name of plaintiff(s)) | | | | | | | | | | | | | | |
| **2.** | I make this affidavit in support of the plaintiff’s request to note the defendant(s) in default, where all the defendants have been or will be served outside the court’s territorial division [R. 11.01 (3)]. | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3.** | The plaintiff is entitled to proceed with this action in this territorial division because this is: | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | where the event (cause of action) took place. | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | where the defendant lives or carries on business. | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | the court nearest to the place where the defendant lives or carries on business [R. 6.01]. | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | |

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| **FORM 11A** | | | | **PAGE 2** | | | | | | | | | | | |  | | |
|  | | | |  | | | | | | | | | | | | Claim No. | | |
| **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 | | | | | |  | | | | | |
|  |  | | | | | |  | | | | | | (date) | | | | | |
| in accordance with [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 |
|  | | | | | | |  | (date) | | | | | | | | | |  |
| with [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 | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **WARNING:** | | | **IT IS AN OFFENCE UNDER THE *CRIMINAL CODE* TO KNOWINGLY SWEAR OR AFFIRM A FALSE AFFIDAVIT.** | | | | | | | | | | | | | | | |
| Les formules des tribunaux sont affichées en anglais et en français sur le site [www.ontariocourtforms.on.ca](http://www.ontariocourtforms.on.ca/). Visitez ce site pour des renseignements sur des formats accessibles. | | | | | | | | | | | | | | | | | | |