

FORM 74.8

Courts of Justice Act

AFFIDAVIT OF EXECUTION OF WILL OR CODICIL

ONTARIO

SUPERIOR COURT OF JUSTICE

In the matter of the execution of a will or codicil of *(insert name)*

AFFIDAVIT

I, *(insert name)*, of *(insert city or town and county or district, metropolitan or regional municipality of residence)*, make oath and say/affirm:

- 1. On *(date)*, I was present *(insert in person or by video conference)* and saw the document marked as Exhibit "A" to this affidavit executed by *(insert name)*.
- 2. *(Insert name)* executed the document in the presence of myself and *(insert name of other witness and city or town, county or district, metropolitan or regional municipality of residence)*.
- 3. On *(date)*, I signed the document in the testator's presence *(insert by video conference, if applicable)* as an attesting witness.

Insert either paragraph 4 or 5 below if both witnesses were present when each signed (in addition to the testator whose presence is required).

- 4. *(insert name of other witness)* and I were both physically present at the same time and signed the document in the testator's presence by video conference as attesting witnesses.

OR

- 5. *(insert name of other witness)* was in the presence of myself by video conference and the testator by video conference when I signed the document as an attesting witness.

Sworn or Affirmed before me: *(select one):* in person OR by video conference

Complete if affidavit is being sworn or affirmed in person:

at the (City, Town, etc.) of in the (County, 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 (*deponent's name*) at the (City, Town, etc.) of in the (County, Regional Municipality, etc.) of, before me on (*date*) in accordance with [O. Reg. 431/20](#), 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 (*deponent's name*) of (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 (*date*) in accordance with [O. Reg. 431/20](#), Administering Oath or Declaration Remotely.

Commissioner for Taking Affidavits (*or as may be*)

Signature of Commissioner (or as may be)

Signature of Deponent

NOTE: If the testator was blind or signed by making his or her mark, add the following paragraph:

WARNING: A beneficiary or the spouse of a beneficiary should not be a witness.

3. Before its execution, the document was read over to the testator, who (was blind) (signed by making his or her mark). The testator appeared to understand the contents.