

FORM 74.9

Courts of Justice Act

AFFIDAVIT ATTESTING TO THE HANDWRITING AND SIGNATURE OF A HOLOGRAPH
WILL OR CODICIL

ONTARIO

SUPERIOR COURT OF JUSTICE

IN THE ESTATE OF *(insert name)*, deceased.

AFFIDAVIT ATTESTING TO THE HANDWRITING
AND SIGNATURE OF A HOLOGRAPH WILL OR CODICIL

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

1. I was well acquainted with the deceased and have frequently seen the deceased's signature and handwriting.
2. I believe the whole of the document dated *(insert date)*, now shown to me and marked as Exhibit "A" to this affidavit, including the signature, is in the handwriting of the deceased.

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