

ONTARIO
Superior Court of Justice

Affidavit for Jurisdiction
Form 11A Ont. Reg. No.: 258/98

Small Claims Court

Claim No.

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

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](#), 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](#), 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. Visitez ce site pour des renseignements sur des formats accessibles.