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| *ONTARIO* |  |
| Superior Court of Justice | Affidavit of Default of Payment |
|  | Form 20M Ont. Reg. No*.*: 258/98 |
|  |       |  |       |
| Small Claims Court |  | Claim No. |
|       |  |  |
|
| Address |  |
|       |  |
|  | Phone number |  |
| **BETWEEN** |
|       |
| Plaintiff(s)/Creditor(s) |
| **and** |
|       |
| Defendant(s)/Debtor(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 |
| *(Check one box only.)* | [ ]  | plaintiff/creditor. |
| [ ]  | representative of the plaintiff(s)/creditor(s) |       |
|  |  | (Name of plaintiff(s)/creditor(s)) |
| **2.** | To date, I have received from the defendant(s)/debtor(s) $ |       | , the last payment being made |
|  |  | (Amount) |  |
|  | on or about |       | , 20 |    | . |
| **3.** | I make this affidavit in support of a request that: |
| *(Check appropriate box and complete paragraph.)* | [ ]  | the clerk of the court issue a Default Judgment (Form 11B) [R. 9.03(2)(c)]. The defendant(s) |
|  |       |
|  | (Name(s) of defendant(s)) |
|  | failed to make payment in accordance with the proposed terms of payment in the Defence |
|  | (Form 9A) dated |       | , 20 |    | and fifteen (15) days have passed since the |
|  | defendant was served with a Notice of Default of Payment (Form 20L) at the following address(es): |
|  |       |
|  | (Address(es) of defendant(s)) |
| [ ]  | the clerk of the court issue a Default Judgment (Form 11B) [R. 9.03(7)]. The defendant(s) |
|  |       |
|  | (Name of defendant(s)) |
|  | failed to make payment in accordance with the terms of payment order |
|  | dated |       | , 20 |    | . |
| 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. |

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| FORM 20M | **PAGE 2** |  |
|  |  | Claim No. |
| *(Check appropriate box and complete paragraph.)* | [ ]  | I may enforce the judgment [R. 20.02(3)]. The debtor(s) |
|  |       |
|  | (Name(s) of debtor(s)) |
|  | failed to make payment in accordance with the order for periodic payment dated |
|  |       | , 20 |    | , and fifteen (15) days have passed since the debtor(s) has/have |
|  | been served with a Notice of Default of Payment (Form 20L) at the following address(es): |
|  |       |
|  | (Address(es) of debtor(s)) |
|  | A Consent (Form 13B) in which the creditor waives the default has not been filed. |
| **4.** | The unpaid balance is calculated as follows: |
| (A) | **DEBT** | $ |       |  |
| (B) | **PRE-JUDGMENT INTEREST** calculated |
|  | on the sum of $ |       |  | at the rate of |       | % |
|  | per annum from |       | , 20 |    | to |       | , 20 |    | , |
|  | being |       | days. | $ |       |  |
|  |  |  |  |  |  |  |
|  | **NOTE:**  | Calculation of interest is always on the amount owing from time to time as payments are received. This is true for both pre-judgment and post-judgment interest. Attach a separate sheet setting out how you calculated the total amount of any pre/post-judgment interest. |  |
|  | **SUBTOTAL** (amount of judgment) | **$** |       |  |
| (C) | **COSTS** to date of judgment | $ |       |  |
| (D) | **TOTAL AMOUNT OF PAYMENTS RECEIVED FROM DEBTOR** after judgment (if any) | (minus) | $ |       |  |
| (E) | **POST-JUDGMENT INTEREST** to datecalculated |
|  | on the sum of $ |       |  | at the rate of |       | % |
|  | per annum from |       | , 20 |    | to |       | , 20 |    | , |
|  | being |       | days. | $ |       |  |
| (F) | **SUBSEQUENT COSTS** incurred after judgment (including the cost of serving the Notice of Default of Payment (Form 20L)) | $ |       |  |
|  | **TOTAL DUE** | **$** |       |  |
|  |  |  |  |
| 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 20M** | **PAGE 3** |   |
|  |  | 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.** |