|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | |
| Formule 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AFFIDAVIT DE SIGNIFICATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ONTARIO  COUR SUPÉRIEURE DE JUSTICE | | | | | | |  | (*Règles de procédure en matière criminelle*, règle 5) | | | | | | | | | | | | | | | | | | | | |  | |  | | | | |
|  |  | |
|  | | | | | | | N° du dossier du greffe (s'il est connu) | | | | |
| Région | | | | | | |
| ENTRE : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SA MAJESTÉ LE ROI** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **- et -** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (nom de l'accusé) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Je soussigné(e), | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | , | |
|  | | | | | (nom et prénoms) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| de la |  | | | | | | | | | | | | | | | | | | | | | | dans le/la | |  | | | | | | | | | , | |
|  | (ville, etc.) | | | | | | | | | | | | | | | | | | | | | |  | | (comté, district, municipalité régionale, etc.) | | | | | | | | |  | |
| DÉCLARE SOUS SERMENT (ou AFFIRME SOLENNELLEMENT) ce qui suit : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(Signification à personne)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | Le |  | | | | | | | | , à | | |  | | | | | | | | | , j'ai signifié à | | | |  | | | | | | | | |
|  | |  | (date) | | | | | | | |  | | | (heure) | | | | | | | | |  | | | | (nom du destinataire) | | | | | | | | |
|  | | le(s) | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | (indiquer le(s) document(s) signifié(s)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | en lui en laissant une copie à/au (adresse où la signification a été effectuée) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | . |
|  | | Si les règles prévoient la signification à personne à une personne morale, etc., en laissant une copie du(des) document(s) à une autre personne, remplacer par : en en laissant une copie à (indiquer le nom et le titre de la personne) à/au (adresse où la signification a été effectuée) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | . |
| 2. | | J'ai pu identifier la personne au moyen de | | | | | | | | | | | | | | | | | (indiquer le moyen par lequel la personne a pu être identifiée) | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(Signification par la poste à la dernière adresse connue tenant lieu de signification à personne ou de signification par courrier électronique)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | Le |  | | | | | | | , j'ai envoyé à | | | | | | | | | | |  | | | | | | | | | | | | une copie du(des) | | |
|  | |  | (date) | | | | | | |  | | | | | | | | | | | (nom du destinataire) | | | | | | | | | | | |  | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | par courrier affranchi de première classe (ou par | | | | | | | | | |
|  | | (indiquer le(s) document(s) envoyé(s)) | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | courrier recommandé ou certifié) adressé à | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | , avocat représentant | | | |
|  | |  | | | | | | | | | | | | | | | | | | (nom de l'avocat) | | | | | | | | | | | |  | | | |
|  | |  | | | | | | | | | | | | | , à/au | |  | | | | | | | | | | | | | | | | | | . |
|  | | (nom de la partie) | | | | | | | | | | | | |  | | (adresse postale au complet) | | | | | | | | | | | | | | | | | |  |
| **(Signification par la poste à l'avocat inscrit au dossier)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | J'ai signifié à | | | |  | | | | | | | | | | | | | | | | le(s) | |  | | | | | | | | | | | |
|  | |  | | | | (nom du destinataire) | | | | | | | | | | | | | | | |  | | (indiquer le(s) document(s) signifié(s)) | | | | | | | | | | | |
|  | | en en envoyant une copie par courrier affranchi de première classe *(ou par courrier recommandé ou certifié)* le | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | à | | |  | | | | | | | | | | | | | | | | | | , avocat représentant | | | | | |
|  | | (date) | | | | | | |  | | | (nom de l'avocat) | | | | | | | | | | | | | | | | | |  | | | | | |
|  | |  | | | | | | | | | | | | | | , à/au | |  | | | | | | | | | | | | | | | | | . |
|  | | (nom de la partie) | | | | | | | | | | | | | |  | | (adresse postale au complet) | | | | | | | | | | | | | | | | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Page 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AFFIDAVIT DE SIGNIFICATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (*Règles de procédure en matière criminelle*, règle 5. formule 7) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(Signification par la poste d’une partie qui agit en son propre nom ou à un tiers)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | | J'ai signifié à | | |  | | | | | | | | | | | | | | le(s) | |  | | | | | | | | | | | | | | | |
|  | | |  | | | (nom de la partie ou du destinataire) | | | | | | | | | | | | | |  | | (indiquer le(s) document(s) signifié(s)) | | | | | | | | | | | | | | | |
|  | | | en en envoyant une copie par courrier affranchi de première classe *(ou par courrier recommandé ou certifié)* le | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | à/au | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | , | |
|  | | | (date) | | | |  | | | (adresse postale au complet) | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | qui est la dernière adresse connue de/du | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | . | | | | | |
|  | | |  | | | | | | | | | | | | | (nom de la partie ou de la personne) | | | | | | | | | | | | | | | |  | | | | | |
| **(Signification au lieu de résidence, tenant lieu de signification à personne ou de signification par courrier électronique)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | | J'ai signifié à | | |  | | | | | | | | | | | | | | | le(s) | |  | | | | | | | | | | | | | | |
|  | | |  | | | (nom du destinataire) | | | | | | | | | | | | | | |  | | (indiquer le(s) document(s) signifié(s)) | | | | | | | | | | | | | | |
|  | | | signifié(s) en en laissant une copie le | | | | | | | | | | |  | | | | | | | | | | | | | | , à | |  | | | , à une personne | | | | |
|  | | |  | | | | | | | | | | | (date) | | | | | | | | | | | | | |  | | (heure) | | |  | | | | |
|  | | |  | | | | | | | | | | | | | | | qui m'a semblé être un adulte habitant sous le même toit que | | | | | | | | | | | | | | | | | | | |
|  | | | (indiquer son nom s'il est connu) | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | à/au | |  | | | | | | | | | | | | | | | | | | |
|  | | | (nom du destinataire) | | | | | | | | | | | | | |  | | (adresse où la signification a été effectuée) | | | | | | | | | | | | | | | | | | |
|  | | | et en en envoyant une copie le | | | | | | | |  | | | | | | | | | | | | | | à | | | |  | | | | | | | | |
|  | | |  | | | | | | | | (date) | | | | | | | | | | | | | |  | | | | (nom du destinataire) | | | | | | | | |
|  | | | à la même adresse, par courrier affranchi de première classe. *(ou par courrier recommandé ou certifié)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | | | J'ai vérifié que la personne était un adulte habitant sous le même toit au moyen de | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | (indiquer le moyen de vérification utilisé à cette fin) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | | | Avant de signifier le(s) document(s) de cette façon, j'ai tenté, sans succès, de faire la signification à | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | par voie de signification à personne à la même adresse le | | | | | | | | | | | | | | | | | | | | |  | | . | |
|  | | | (nom du destinataire) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | (date) | |  | |
|  | | | *(S'il y a eu plusieurs tentatives de signification, ajouter :* et de nouveau le | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | .*)* | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | (date) | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |  | | | Signature du déposant | | | | | | | | | | |
| Déclaré sous serment/Affirmé solennellement devant moi dans le/la | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
|  | | | | | | | | | (ville, etc.) | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| de |  | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| dans le/la | | | |  | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
|  | | | | | (comté, district, municipalité régionale, etc.) | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| de | |  | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| le |  | | | | | | | 20 | | | |  | | | . | | | | | | | | | | |  | | | | | | | | | | | |
|  | (date) | | | | | | |  | | | | | | | | | | | | | | | |  | | Commissaire auxaffidavits (ou la mention appropriée) | | | | | | | | | | | |