



AFFIDAVIT OF WITNESS

I SWEAR / AFFIRM THAT:

1. I was personally present and did see the attached instrument signed and executed by

 (print full name of person(s) who signed the document, exactly as shown in the document).
2. The party(ies) identified themselves to me and is (are), in my belief, of the full age of nineteen (19) years.
3. I am not
 (a) a party to this instrument; or
 (b) a spouse, within the meaning of the *Family Property and Support Act*, of a party to this instrument.

SWORN / AFFIRMED BEFORE ME

at _____ in _____

on the _____ day of _____, 20____

Signature

Name

Signature of Notary or Commissioner

Name

Notary Public in and for the Yukon;
or Notary Public or Commissioner for Oaths in and for

My commission expires: **YYYY / MM / DD**

All notaries and commissioners must print or stamp their name and qualifications as well as the expiry date of their commission, or indicate that their commission does not expire; all notaries outside of Yukon must affix their official seal (ss. 61(3), Evidence Act).

Personal information in this form is collected under section 15(c)(i) of the *Access to Information and Protection of Privacy Act* (ATIPPA), and under the *Condominium Act, 2015*, the *Land Titles Act, 2015* and the Regulations under both of those Acts, for the purpose of carrying out the activities of the Land Titles Office, such as creating condominiums, registering the title to land and compilation of public registers. ATIPPA does not apply to the information in public registers kept by the Land Titles Office. Any person is entitled to access to the information contained in the public registers and may make copies or extracts of the information. If you have questions related to the collection of this information, contact the Deputy Registrar of Land Titles at 867-667-5612, or toll free, within Yukon 1-800-661-0408, ext. 5612.