

AFFIDAVIT OF AUTHORITY Government Signatory

ISWEAR / AFFIRM THAT:		
1. I am the	_ (position) of	(name of government).
2. I have authority to execute the annexed instrument on behalf of the above named government, without using a seal.		
SWORN / AFFIRMED BEFORE ME	Signature	
atin		
on the day of,	20 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 qualifications as well as the expiry date of their commission, or their commission does not expire; all notaries outside of Yukon their official seal (ss. 61(3), Evidence Act).	indicate that	

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.