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| FORM 74D |
| *Courts of Justice Act* |
| ONTARIO |
| **SUPERIOR COURT OF JUSTICE** |
| In the matter of the execution of a Will or codicil of *(insert name).* |

AFFIDAVIT OF EXECUTION OF WILL OR CODICIL

I, *(insert name),* of *(insert city or town and county, district, or regional municipality of residence),* make oath and say/affirm:

1. On *(insert date),* I was present *(insert “in person” or “by video conference”)* and saw the document marked as Exhibit “A” to this affidavit executed by *(insert name).*
2. *(Insert name)* executed the document in my presence and in the presence of *(insert name of other witness and city or town, county, district, or regional municipality of residence).*
3. On *(insert date),* I signed the document in the testator’s presence *(insert “by video conference”, if applicable)* as an attesting witness.

*(Insert either paragraph 4 or 5 below if both witnesses were present when each signed (in addition to the testator whose presence is required).)*

1. *(Insert name of other witness)* and I were both physically present at the same time and signed the document in the testator's presence *(insert by video conference, if applicable)* as attesting witnesses.

OR

1. *(Insert name of other witness)* was in my presence by video conference and in the presence of the testator by video conference when I signed the document as an attesting witness.

*(Insert paragraph 6 if applicable.)*

1. I am a *(insert “lawyer” or “paralegal”)* licensed by the Law Society of Ontario.

*(Insert paragraph 7 if applicable (if the testator was blind or signed by making their mark).)*

1. Before the execution of the Will by the testator, the document was read over to the testator, who *(insert “was blind” or “signed by making their mark”)*. The testator appeared to understand the contents of the Will.

Sworn or Affirmed before me: [ ]  in person OR [ ]  by video conference

***Complete if affidavit is being sworn or affirmed in person:***

by *(insert name of deponent)* at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, on *(insert date)*.

*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 *(insert name of deponent)* at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, before me on *(insert date)* in accordance with [O. Reg. 431/20](https://www.ontario.ca/laws/regulation/r20431), Administering Oath or Declaration Remotely.

***Complete if deponent and commissioner are not in same city or town:***

by *(insert name of deponent)* at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, before me at the *(City, Town, etc.)* of *(insert name of city, town, etc.)* in the *(County, Regional Municipality, etc.)* of *(insert name of County, Regional Municipality, etc.)*, on *(insert date)* in accordance with [O. Reg. 431/20](https://www.ontario.ca/laws/regulation/r20431), Administering Oath or Declaration Remotely.

This *(insert date)* day of *(insert month)*, *(insert year)*.

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| Signature of Commissioner | Signature of Deponent |

**WARNING:** A beneficiary or the spouse of a beneficiary should not be a witness to the execution of the Will or codicil.

RCP-E 74D (September 1, 2021)