SWORN STATEMENT - PROOF OF RESIDENCE

COMPLETE SECTION 1 OR 2, DEPENDING ON YOUR SITUATION

SEE INSTRUCTIONS ON REVERSE SIDE

1 To be completed by the person making a sworn statement about his/her own domicile		
I, the undersigned,First and la	ast names	, domiciled at
Number, street, apartment, muni	icipality and postal code	
solemnly declare that I have been domiciled at the above address sin	Year Month	
Please provide a document to support your state	ment (see details on back). Go to secti	on 3.
OR		
2 To be completed by the person stating, under oath, the	e place of residence of the card	applicant
I, the undersigned, First and last names of the landlord, the landlord's repres	sentative or the tenant whose name appears on the le	, domiciled at
Number, street, apartment, muni	icipality and postal code	,
and whose phone number is, solemnly Area code	declare that	
First and last names of the	ne card applicant	
has been domiciled at the above-mentioned address or at (if the appli	icant's address is different from yours)
Number, street, apartment, mun	icipality and postal code	
since Year Month and that I am the landlord, the landlord's rep	resentative or the tenant whose name	appears on the lease.
To be completed before the commissioner for oaths I solemnly declare that all the information in this statement is accurate	e and complete.	
X		
	ne person making the sworn statement	Date
		Seal —
SECTION RESERVED FOR THE COMMISSIONER FOR OATHS		
Sworn before me at		
Location		
First and last names of the commissioner	Commissioner number	
Signature of the commissioner for oaths	Date	

INSTRUCTIONS

IMPORTANT

A person who willingly misleads, declares or attests under oath a fact that he/she knows to be inaccurate is liable to be prosecuted for perjury under the *Criminal Code of Canada*. The Régie de l'assurance maladie du Québec is entitled to verify the authenticity of the declarations made in this statement.

Section 1: To be completed by the person making the sworn statement about his/her own domicile.

Enter your first name, last name and full address, as well as the date you moved to this address.

Supporting document

When you make this sworn statement, you **must** provide a copy of a bill or statement of account from a telephone, electricity or cable company, or a notice of assessment (school or municipal taxes) on which appear your name and address. Please note that a letter addressed to you is not acceptable.

Section 2: To be completed by the landlord, the landlord's representative or the tenant whose name appears on the lease, who is stating, under oath, the place of residence of the card applicant.

Enter :

- · your first and last names, address and phone number
- · the name of the person for whom the proof of residence must be provided
- the residential address of this person (if different from that of your own domicile)
- the date the person moved to this address

Section 3: To be completed before the commissioner for oaths.

Go to the commissioner's office for the signing of the sworn statement. Remember to **take this form and an ID document with you.**

Persons authorized to act in the capacity of commissioner for oaths include:

- commissioners for oaths appointed by the Ministère de la Justice (please refer to www.assermentation.justice.gouv.qc.ca to find the commissioner for oaths nearest you)
- · certain employees at the reception desks of the Régie de l'assurance maladie du Québec
- lawyers and notaries duly registered with the Barreau du Québec or the Chambre des notaires du Québec and justices of the peace, throughout Québec
- the mayor, councillor, clerk or secretary-treasurer of a municipality, within the territory of his/her municipality
- · clerks of Québec courts and their assistants, within the judicial district where they are appointed
- the secretary general, assistant secretaries general and assistant secretaries of the National Assembly, throughout Québec
- agents in certain Services Québec offices (call to confirm before going there)

A fee may be required of the person having to provide proof of residence for the swearing-in.