



Ministry of Finance
Retail Sales Tax
33 King Street West
PO Box 623
Oshawa ON L1H 8H7

Sworn Statement for a Family Gift of a Used Vehicle in the Province of Ontario

TO WIT:

Under the *Retail Sales Tax Act*, R.S.O. 1990, c.R.31 (as amended), clause 4.2(4) (d), subsections 4.2(8), 8(2), and Regulation 1012 subsection 28(6) of Revised Regulations of Ontario, 1990 made under the *Retail Sales Tax Act*, as amended.

We, _____ of the _____ of _____
(Name of the recipient) (City, Town, etc.) (Name of City, Town, etc.)
 in the _____ of _____, Province of Ontario, and
(County, Regional Municipality, etc.) (Name of County, Regional Municipality, etc.)
 _____ of the _____ of _____
(Name of Donor) (City, Town, etc.) (Name of City, Town, etc.)
 in the _____ of _____, Province of Ontario,
(County, Regional Municipality, etc.) (Name of County, Regional Municipality, etc.)

MAKE OATH AND SAY:

- We have personal knowledge of the matters stated below.
- The Recipient is now the owner of the Used Vehicle named in the Application for Transfer.
- The Used Vehicle owned by the said Recipient is a _____
(Year) (Make) (Model)
 bearing Vehicle Identification Number _____.
- The Donor is the _____ of the Recipient.
(Insert as appropriate: father, mother, stepfather, stepmother, spouse, grandfather, grandmother, step-grandfather, step-grandmother, son, daughter, stepson, stepdaughter, grandson, granddaughter, son-in-law, mother-in-law, father-in-law, daughter-in-law, step-grandson, step-granddaughter, brother, sister.)
- This Used Vehicle was acquired by the said _____ on _____
(Name of Owner / Recipient) (Date)
 from _____ as a gift for no consideration, and has not been transferred on a
(Name of Donor)
 tax-exempt basis in Ontario as a gift within the twelve-month period immediately preceding the acquisition.

SWORN before me

at the _____ of _____)
(City, Town, etc.) (Name of City, Town, etc.))
 in the _____ of _____)
(County, Regional Municipality, etc.) (Name of County, Regional Municipality, etc.))
 this _____ day of _____)
(Month) (Year))
 Seal _____)
 _____)
(Signature of Recipient)
 _____)
(Signature of Donor)

Jeffrey Thomas Allan Aikman, Paralegal, Notary Public and Commissioner for Taking Affidavits in and for the Province of Ontario. LSO #: P11206
 Tel: 519-381-4030 Email: jeff@aikmanlegal.ca
 This document contains an embossed notarial seal.

* **Commissioner may be:**
 Lawyer/Notary Public
 Justice of the Peace
 Local municipal/town Clerk, Deputy Clerk, Treasurer, Head of Municipal Council, Reeve/Deputy
 Others appointed by Lieutenant Governor to administer oaths and to take affidavits (call 1 866 668-8297 for availability of a Commissioner).

WARNING: Every person who knowingly makes a false or deceptive statement herein is guilty of an offence and is liable on conviction to a fine, or term of imprisonment, or both (*Retail Sales Tax Act*, Subsections 32(4) and (32(4.1)).

Personal information is collected on this form under authority of subsection 4.2(8) of the Ontario *Retail Sales Tax Act*, R.S.O. 1990, c.R.31, (as amended) and may be used to determine eligibility for retail sales tax exemption. Questions about this collection should be directed to: Ministry of Finance, 33 King Street West, PO Box 623, Oshawa ON L1H 8H7, 1 866 668-8297.