## Instructions for completing a statutory declaration

Please complete the following form using the notes in the left-hand margin for guidance. More guidance on making statutory declarations can be found at <a href="https://www.justice.vic.gov.au">www.justice.vic.gov.au</a>.

When making the statutory declaration the declarant must say aloud:

I, [full name of person making declaration] of [address], declare that the contents of this statutory declaration are true and correct.

## **Statutory Declaration**

I.

Insert the name, address and occupation (or alternatively, unemployed or retired or child) of person making the statutory declaration.

make the following statutory declaration under the **Oaths and Affirmations Act 2018:** 

1.

Set out matter declared to in numbered paragraphs. Add numbers as necessary.

I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.

Signature of person making the declaration

Place (City, town or suburb)

Declared at

\*in the state of Victoria

Date on

Signature of authorised statutory declaration witness

I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration:

Date on

Name, capacity in which authorised person has authority to witness statutory declaration, and address (writing, typing or stamp)

A person authorised under section 30(2) of the **Oaths and Affirmations Act 2018** to witness the signing of a statutory declaration.

The witness must only sign this section if the person making the statutory declaration is illiterate, blind or cognitively impaired and the statutory declaration is read to them. I certify that I read this statutory declaration to [name of the person making the statutory declaration] at the time the statutory declaration was made.

This section must be signed by any person who has assisted the person making the statutory declaration, for example by translating the document or reading it aloud. If no assistance was required, this section does not need to be completed.

**I certify that I have assisted** [name of the declarant] by [insert assistance provided, for example translating the document].

Signed:

On:

Date

Name and address of person providing assistance

Name and address of person providing assistance: