

**Authorization**

I, \_\_\_\_\_, authorize the transfer of Title Number(s):  
(Name of Owner as appears on Title)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Or Application Sequence Number(s):

\_\_\_\_\_

To \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date (day, month, year)                      Witness Signature                      Title Owner Signature

Check if Witness is Lawyer in and for the Province of Saskatchewan \_\_\_\_\_  
Lawyer Name

**Affidavit of Execution (if witness is not a Saskatchewan lawyer)**

I, \_\_\_\_\_ of \_\_\_\_\_ in the Province of \_\_\_\_\_  
Witness Name                      Place

**make oath and say that:**

1. I personally know \_\_\_\_\_ who is  
(person whose signature was witnessed)

**Or**

I have satisfied myself that \_\_\_\_\_ is  
(person whose signature was witnessed)

the individual named in this document and I was personally present when it was signed.

2. The individual whose signature I witnessed is in my belief the full age of eighteen years.

Sworn before me at \_\_\_\_\_

in the Province of \_\_\_\_\_

on \_\_\_\_\_  
Date (day, month, year)

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
\_ A Commissioner for Oaths for Saskatchewan **OR**  
Notary Public for the Province of

\_\_\_\_\_  
My commission/appointment expires

\_\_\_\_\_ **OR** Being a Solicitor  
Date (day, month, year)