



**Financial Institution - Affidavit for
Change of Address/Method of Delivery**

I, _____, of _____ in the Province of _____
(Name) (Town/City)
(Province), make oath and say that:

1. I, _____, of _____
(Position - i.e., President, Signing Officer etc.) (Financial Institution)
am authorized to swear this Affidavit on behalf of the above named Financial Institution.

2. That the current address associated with Client Number _____ is:

Address

City

Province/State

Country (if outside Canada)

Postal/Zip Code

3. That the correct address for the above referenced Client Number should be:

Address

City

Province/State

Country (if outside Canada)

Postal/Zip Code

4. That I make this Affidavit in support of an application pursuant to Section 86 of *The Land Titles Regulations, 2001* to change the address or output method utilizing Client Number _____ in the Abstract or Land Registry.

Sworn before me at

(Town/City)

in the Province of

(Province)

on

(Date - dd/mmm/yyyy)

Client Signature

(Signature)

A Commissioner of Oaths for Saskatchewan

My Commission/Appointment expires

-OR-

(Date - dd/mmm/yyyy)

Notary Public for the

Province of

(Province)

My Commission/Appointment Expires

OR Being a Solicitor

(Date - dd/mmm/yyyy)