|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AFFIDAVIT | | | | | |
|  | | | | | NO: OF 20 |
| **Affidavit of:**  (*name of deponent*) |  | | | | |
| **Address:** |  | | | | |
| **Occupation:** |  | | | | |
| Details of affidavit | | | | | |
| **Made on behalf of:**  (*Name the person or applicant on whose behalf the affidavit was made)* |  | | | | |
| Filed in support of:(*Refer to the application that the affidavit supports and include the date of the application)* |  | | | | |
| **Date affidavit was sworn/affirmed:** |  | | | | |
| **Affidavit prepared by:** | |  | | | |
| Name: |  | | | | |
| Firm: |  | | | | |
| Street Address: |  | | | | |
| Telephone No: |  | | Fax No: |  | |
| Email address: |  | | | | |
| Reference No. |  | | | | |
| **Signature of applicant or lawyer** | …………………………………………  Applicant / Applicant’s lawyer | | | | Date: |

**AFFIDAVIT**

[\*Insert table of contents if affidavit (including annexures) exceeds 10 pages]

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| **Document number** | **Details** | **Paragraph** | **Page** |
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| 1 | Affidavit of [deponent] |  |  |
| 2 | Annexure “[AB1]”, being copy of [brief description] |  |  |
| 3 | Annexure “[AB2]”, being copy of [brief description] |  |  |

I [name address and occupation] [\*either]say on oath [\*or]affirm:

1. [State which answers are true based on your own knowledge and which are true to the best of your knowledge, information and belief based on your inquiries of relevant persons].

**[Insert headings to identify subject matter in paragraph(s).]**



|  |  |  |
| --- | --- | --- |
| Sworn / Affirmed by the deponent  at [place]  in [State or Territory]  on [date]  Before me: | )  )  )  )  ) |  |
| Signature of deponent |
|  |  |  |

Signature of witness

[Name and qualification of witness]

[\* Delete if inapplicable]