

# Statutory Declaration in the Absence of Proof of Ownership



## A. Declaration

Caution: It is a criminal offence to knowingly make a false declaration.

I, \_\_\_\_\_ of \_\_\_\_\_  
(Name) (Address)

in the Province of Manitoba, hereby solemnly declare that I:

- purchased  trade  
 received as a gift  homebuilt

\_\_\_\_\_ (Year) \_\_\_\_\_ (Make/Model) \_\_\_\_\_ (Serial Number)

from \_\_\_\_\_ of \_\_\_\_\_  
(Name) (Address)

on \_\_\_\_\_ and that the total consideration given to acquire ownership of this vehicle was \$ \_\_\_\_\_  
(Date)

I, \_\_\_\_\_ solemnly declare that the information in this declaration is true and complete, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

SWORN before me at the City of \_\_\_\_\_

in the province of \_\_\_\_\_

this \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_  
Day Month Year

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
A Commissioner for Oaths in the Province of Manitoba

My commission expires \_\_\_\_\_

## B. Indemnification by an Applicant/Registrant

In consideration to Manitoba Public Insurance agreeing to comply with my request for registration of the above vehicle, the undersigned, the heirs, executors and/or administrators will save harmless and keep indemnified Manitoba Public Insurance Corporation and the Government of Manitoba and its Ministers and their respective officers, employees and agents, successors and assigns, from all claims, liabilities and demands respecting personal injuries (including death) damage or loss of property, economic loss or infringement of rights caused by the vehicle and its registration in the name of the applicant, including any legal costs and/or judgment arising out of any suit brought against or defended by Manitoba Public Insurance related to this request for registration.

**By signing this document, I declare that I have carefully read and fully understand the obligations contained in this agreement.**

Signed this \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_  
Day Month Year

\_\_\_\_\_  
Registrant / Applicant

\_\_\_\_\_  
Witness

**Note: This Declaration must be attached to the Application.**