STATUTORY DECLARATION

l/We	[FULL NAME]			
of	[I OLL IV WIL]			
•	[ADDRESS]			
	[OCCUPATION]			
nake i		orv declaration	on under the O	aths and Affirmations Act 2018:
	-			
. M	y true and correct	name is		
2. la	am identical with			
re	gistered as a prop	rietor of the	land in folio of	f the Register
\	/olume	Folio		
. Th	ne reason for this a	application is	5	
We d	eclare that the co	ontents of the	his statutory	declaration are true and correct and I/we make it
				at I/we know to be untrue is an offence.
_		aking this	declaration [to	be signed in front of an Authorised Witness]
	red at			[place] in the State of Victoria
on		/	/	[date]
	an authorised sta on making the de		aration witne	ss and I sign this document in the presence of the
ĸ				
Signa	ature of authorise	d statutory	declaration	witness
on		/		[date]
	ame of authorised statu writing, typing or stam	•	n witness in	
	nal or professional add ation witness in legible			
Qualifi	ication as an authorise	d statutory dec	laration witness]	
	son authorised und ory declaration.	der section :	30(2) of the O	aths and Affirmations Act 2018 to witness the signing of
(atutory decla	aration were re	re used in preparing this statutory declaration and that the ead to the person making the statutory declaration in a cumstances.
		statutory do	claration witne	

* strikeout if not applicable