**STATUTORY DECLARATION**

|  |  |
| --- | --- |
| I/We |  |
| of | [FULL NAME] |
|  | [ADDRESS] |
| [OCCUPATION]  make the following statutory declaration under the **Oaths and Affirmations Act 2018:** | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | The current market value of the land described in folio of the Register | | | | | | | |
|  | volume(s) | |  | | folio(s) |  | | with all |
|  | improvements thereon is $ | | |  | | | | |
|  |  | | | | | | | |
| 2. | The missing certificate of title last issued from Land Use Victoria on | | | | | |  | |
|  | to |  | | | | | | |
|  |  | *(Attach issue search results)* | | | | | | |
|  |  | | | | | | | |
| 3. |  | | | | | | | |
|  |  | | | | | | | |
|  | *(How that person or firm disposed of the certificate of title.)* | | | | | | | |
|  |  | | | | | | | |
| 4. |  | | | | | | | |
|  |  | | | | | | | |
|  | *(When and under what circumstances did the applicant last see the missing certificate of title.)* | | | | | | | |
|  |  | | | | | | | |
| 5. | The missing certificate of title has not been deposited as a security or on lien. | | | | | | | |
|  |  | | | | | | | |
| 6. | I/We have made full and exhaustive searches and inquiries for the missing certificate of title | | | | | | | |
|  | with the following: | | | | | | | |
|  | Banks…………………………………………………………………………………………………... | | | | | | | |
|  | Solicitors and Conveyancers………………………………………………………………………… | | | | | | | |
|  | and at home, failing to locate the certificate of title. | | | | | | | |
|  |  | | | | | | | |
| 7. | I/We undertake to deliver up the missing certificate of title to the Registrar of Titles should it ever | | | | | | | |
|  | come into my/our possession or control. | | | | | | | |
|  | | | | | | | | |

**I/We declare that the contents of this statutory declaration are true and correct and I/we make it knowing that making a statutory declaration that I/we know to be untrue is an offence.**

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| --- | --- | --- | --- |
| **Signature of person making this declaration** *[to be signed in front of an Authorised Witness]* | | | |
| Declared at |  | | *[place]* in the State of Victoria |
| on | / / | | *[date]* |
| **I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration:** | | | |
| 🗶 | | | |
| **Signature of authorised statutory declaration witness** | | | |
| on | / / | | *[date]* |
| *[Full name of authorised statutory declaration witness in legible writing, typing or stamp]* | |  |  |
| *[Personal or professional address of authorised statutory declaration witness in legible writing, typing or stamp]* | |  |  |
| *[Qualification as an authorised statutory declaration witness]* | |  |  |
| A person authorised under section 30(2) of the **Oaths and Affirmations Act 2018** to witness the signing of a statutory declaration. | | | |

*\* I confirm that reasonable modifications were used in preparing this statutory declaration and that the contents of this statutory declaration were read to the person making the statutory declaration in a way that was appropriate to the person’s circumstances.*

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|  |
| Signature of authorised statutory declaration witness |

\* strikeout if not applicable