



Ministry of Finance
Retail Sales Tax
33 King Street West
PO Box 623
Oshawa ON L1H 8H7

Sworn Statement for a Family Gift of a Used Vehicle in the Province of Ontario

TO WIT:

Under the *Retail Sales Tax Act*, R.S.O. 1990, c.R.31 (as amended), clause 4.2(4) (d), subsections 4.2(8), 8(2), and Regulation 1012 subsection 28(6) of Revised Regulations of Ontario, 1990 made under the *Retail Sales Tax Act*, as amended.

We, _____ of the _____ of _____
(Name of the recipient) (City, Town, etc.) (Name of City, Town, etc.)
 in the _____ of _____, Province of Ontario, and
(County, Regional Municipality, etc.) (Name of County, Regional Municipality, etc.)
 _____ of the _____ of _____
(Name of Donor) (City, Town, etc.) (Name of City, Town, etc.)
 in the _____ of _____, Province of Ontario,
(County, Regional Municipality, etc.) (Name of County, Regional Municipality, etc.)

MAKE OATH AND SAY:

1. We have personal knowledge of the matters stated below.
2. The Recipient is now the owner of the Used Vehicle named in the Application for Transfer.
3. The Used Vehicle owned by the said Recipient is a _____
(Year) (Make) (Model)
 bearing Vehicle Identification Number _____.
4. The Donor is the _____ of the Recipient.
(Insert as appropriate: father, mother, stepfather, stepmother, spouse, grandfather, grandmother, step-grandfather, step-grandmother, son, daughter, stepson, stepdaughter, grandson, granddaughter, son-in-law, mother-in-law, father-in-law, daughter-in-law, step-grandson, step-granddaughter, brother, sister.)
5. This Used Vehicle was acquired by the said _____ on _____
(Name of Owner / Recipient) (Date)
 from _____ as a gift for no consideration, and has not been transferred on a
(Name of Donor)
 tax-exempt basis in Ontario as a gift within the twelve-month period immediately preceding the acquisition.

SWORN before me

at the _____ of _____)
(City, Town, etc.) (Name of City, Town, etc.))
 in the _____ of _____)
(County, Regional Municipality, etc.) (Name of County, Regional Municipality, etc.))
 this _____ day of _____)
(Month) (Year))
)
) * **Commissioner may be:**
) Lawyer/Notary Public
) Justice of the Peace
) Local municipal/town Clerk, Deputy Clerk, Treasurer, Head of
) Municipal Council, Reeve/Deputy
) Others appointed by Lieutenant Governor to administer oaths and to
) take affidavits (call 1 866 668-8297 for availability of a Commissioner).

 * A Commissioner, etc.

WARNING: Every person who knowingly makes a false or deceptive statement herein is guilty of an offence and is liable on conviction to a fine, or term of imprisonment, or both (*Retail Sales Tax Act*, Subsections 32(4) and (32(4.1)).

Personal information is collected on this form under authority of subsection 4.2(8) of the Ontario *Retail Sales Tax Act*, R.S.O. 1990, c.R.31, (as amended) and may be used to determine eligibility for retail sales tax exemption. Questions about this collection should be directed to: Ministry of Finance, 33 King Street West, PO Box 623, Oshawa ON L1H 8H7, 1 866 668-8297.