REGISTRATION AFFIDAVIT (Family)
Department of Justice and Public Safety
Motor Vehicle Branch
23-00813



COUN	NTY OF				
I, the undersigned (Name):		(Name):			
(Address)	:				
MAF	KE OATH AN	ND SAY AS FOLL	ows:		
(1)	I have perso	onal knowledge of th	ne facts herein sw	vorn to, except where expressly stated otherwise.	
(2)	On			(hereinafter called the	
	(date) (name) deceased) died without leaving a will or other testamentary instrument.				
(3)	I am the	(state relations	hip)	of the deceased and a beneficiary of his/her estate.	
(4)	At the time of	At the time of his/her death, the deceased was the registered owner of			
		(full descri	ption of vehicle)	·	
(5)	I have been advised by (hereinafter called the applicant) and do verily believe that the applicant has made application to the Registrar of Motor Vehicles, Department of Justice and Public Safety, Province of New Brunswick to transfer the registration of the said vehicle into the name of the applicant.				
(6)	I consent to the said transfer and release all right, title and interest in the said vehicle, and I release His Majesty the King in the Right of the Province of New Brunswick from any claim, suit, demand or action that I might have with respect to the said transfer.				
SWC	ORN TO at	and)		
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