

Canad^{*}

STATUTORY DECLARATION OF LEGAL MARRIAGE

TO BE COMPLETED BY THE APPLICANT					Social Insurance Number		
Canada PROVINCE / TERRITORY OF		То	Wit:			nsion Plan and the Old tter of Legal Marriage	
١,							
of the (City, Town, Village)		county of					
in the province / territory of							
Solemnly Declare, that: I am/was legally married to							
My spouse/former spouse and I were married at (Name of church or City Hall etc.)							
of the (City, Town, Village)			county of				
in the province / territory of	on the	day of					
	(day)	day of _	(mo	nth)	(year)	<u> </u>	
The ceremony was performed by							
The names and current addresses of two witnesses to the marriage ceremony are: *							
1. A		1. B					
* (If a witness is deceased or an address is not known, please indicate)							
2. I am unable to produce a marriage certificate as proof of my marriage for the following reason(s):							
I hereby declare that, to the best of my knowledge, the information on this declaration is true and complete. I realize that my personal information is governed by the <i>Privacy Act</i> and may be disclosed where authorized under the <i>Old Age Security Act</i> and the <i>Canada Pension Plan</i> .							
Note: If you make a false or misleading statement, you may be subject to an administrative monetary penalty and interest, if any, under the <i>Canada Pension Plan</i> or the <i>Old Age Security Act</i> , or may be charged with an offence. Any benefits you received or obtained to which there was no entitlement would have to be repaid.							
Your Name (Please print)			Your Signature				
			X				
Name of Spouse or Former Spouse (Please print)			Signature of Spouse or Former Spouse				
Was the form completed and signed by someone other than the applicant? If yes, that person must complete the section below and submit proof that they are authorized to act on behalf of the client. Call us at 1-800-277-9914 to find out what documents are required.							
Name	Relationship to applicant			ne number	Date		
Address			Signature	e			
X							



Service Canada Offices Canada Pension Plan

Mail your forms to:

The nearest Service Canada office listed below. From outside of Canada: The Service Canada office in the **province where you last resided**.

Need help completing the forms?

Canada or the United States: **1-800-277-9914** All other countries: **613-957-1954** (we accept collect calls) TTY: **1-800-255-4786 Important:** Please have your social insurance number ready when you call.

NEWFOUNDLAND AND LABRADOR

Service Canada PO Box 9430 Station A St. John's NL A1A 2Y5 CANADA

PRINCE EDWARD ISLAND

Service Canada PO Box 8000 Station Central Charlottetown PE C1A 8K1 CANADA

NOVA SCOTIA

Service Canada PO Box 1687 Station Central Halifax NS B3J 3J4 CANADA

NEW BRUNSWICK AND QUEBEC

Service Canada PO Box 250 Fredericton NB E3B 4Z6 CANADA

ONTARIO

For postal codes beginning with "L, M or N" Service Canada PO Box 5100 Station D Scarborough ON M1R 5C8 CANADA

ONTARIO For postal codes beginning with "K or P" Service Canada PO Box 2013 Station Main Timmins ON P4N 8C8 CANADA

MANITOBA AND SASKATCHEWAN

Service Canada PO Box 818 Station Main Winnipeg MB R3C 2N4 CANADA

ALBERTA / NORTHWEST TERRITORIES AND NUNAVUT

Service Canada PO Box 818 Station Main Winnipeg MB R3C 2N4 CANADA

BRITISH COLUMBIA AND YUKON

Service Canada PO Box 1177 Station CSC Victoria BC V8W 2V2 CANADA

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