



Authorization

We, \_\_\_\_\_, and \_\_\_\_\_ (Name of Owner as appears on Title)

authorize the transfer of Title Number(s):

Four sets of horizontal lines for entering title numbers.

Or Application Sequence Number(s):

Four horizontal lines for entering application sequence numbers.

To \_\_\_\_\_

\_\_\_\_\_  
Date (day, month, year)      Witness Signature      Title Owner Signature

\_\_\_\_\_  
Date (day, month, year)      Witness Signature      Title Owner Signature

Check if Witness is Lawyer in and for the Province of Saskatchewan \_\_\_\_\_  
Lawyer Name

Affidavit of Execution (if witness is not a Saskatchewan lawyer)

I, \_\_\_\_\_ of \_\_\_\_\_ in the Province of \_\_\_\_\_  
Witness Name      Place

make oath and say that:

1. I personally know \_\_\_\_\_ and \_\_\_\_\_ who are  
(person whose signature was witnessed)      (person whose signature was witnessed)

Or  
I have satisfied myself that \_\_\_\_\_ and \_\_\_\_\_ are  
(person whose signature was witnessed)      (person whose signature was witnessed)

the individuals named in this document and I was personally present when it was signed.



2. The two individuals whose signatures I witnessed are in my belief the full age of eighteen years.

Sworn before me at \_\_\_\_\_

in the Province of \_\_\_\_\_

on \_\_\_\_\_

Date (day, month, year)

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
A Commissioner for Oaths in and for Saskatchewan  
**OR** Notary Public for the Province of

\_\_\_\_\_  
My commission/appointment expires

\_\_\_\_\_ **OR** Being a Solicitor  
Date (day, month, year)