

FORM 3

**SWORN AFFIDAVIT BY PERSON WHO WISHES TO ATTEND A FUNERAL IN ANOTHER
METROPOLITAN AREA, DISTRICT OR PROVINCE
Regulation 11B(8)(d)**

- Note: 1. *A person giving false information on this affidavit shall be guilty of an offence and, on conviction, liable to a fine or to imprisonment for a period not exceeding six months or to both such fine and imprisonment.*
2. *This affidavit may only be sworn to or affirmed at a magistrate's court or police station.*

I,

Full names:						
Surname:						
Identity number						
Address of place of residence:						
Province of residence:						
Contact details:	Cell nr		Tel No (Home)		E-mail address	
Metropolitan area/district travelling to:						
Province travelling to:						
Date of funeral/cremation:						

Hereby declare under oath with regards to the deceased:

Name of deceased:						
Surname of deceased:						
Relationship/Affiliation to the deceased (eg spouse/parent/friend etc)						
I am the person making the funeral arrangements/applies for the issue of a death certificate (mark with an X):	Yes		No			
Date of funeral/cremation:						
Province in which funeral/cremation will take place:						
*City/town/village of funeral:						

***OATH/AFFIRMATION**

I,.....(full names), identity number hereby declare under *oath/affirmation that the above-mentioned information is true and correct.

Signed at on this day of 2020.

.....
Signature of person making affidavit

CERTIFICATION

I hereby certify that before administering the *oath/taking the affirmation, I asked the deponent the following questions and noted *his/her answers in *his/her presence as indicated below:

a) Do you know and understand the contents of the above declaration?

Answer:

b) Do you have any objection to taking the *oath/affirmation?

Answer:

c) Do you consider the *oath/affirmation to be binding on your conscience?

Answer:

I hereby certify that the sheriff (deponent) has acknowledged that *he/she knows and understands the content of this declaration which was *sworn to/affirmed before me, and the sheriff's(deponent's) signature was placed thereon in my presence.

Signed at on this day of 2020.

.....
*Justice of the Peace/Commissioner of Oaths

Full names:
Designation:
Business address:
.....
.....

**Delete which is not applicable".*