

SWORN AFFIDAVIT BY PERSON WHO WISHES TO ATTEND A FUNERAL IN ANOTHER
METROPOLITAN AREA, DISTRICT OR PROVINCE
Regulation 11B(B)(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 (h)	e-mail address
Metropolitan area/district of funeral/cremation :			
Province in which funeral/cremation will take place:			

Hereby declare under oath with regards to the deceased:

Names 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 sheriff(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 _____ this _____ day of _____ 2020.

*Justice of the Peace/Commissioner of Oaths

Full names: _____

Designation: _____

Business address: _____

*Delete which is not applicable".