

Release of Dower Rights

FORM D
Dower Act
Section 7

To the Registrar of Land Titles.

Take notice that I _____

being the wife (or husband) of _____

of _____ in the _____

Who is the registered owner of the following land, namely:

hereby release to my husband (or wife) all my life estate and other dower rights in the above described land and I hereby discharge my husband (or wife) _____ his (or her) heirs, executors and administrators from any claim for dower under the Dower Act in respect of the land.

In witness whereof I have hereunto set my hand and seal this _____ day of _____ , _____

SIGNED, sealed and delivered in the presence of,

BARRISTER AND SOLICITOR

(Signature)

Affidavit in Support of Dower Release

FORM E
Dower Act
Section 7

I, _____ of _____
In the _____, make oath and say:

1. That I am the wife (or husband) of _____
of _____ In the _____

2. That my husband (or wife) is the registered owner of the following land, namely:

3. That I am aware that the Dower Act gives me a life estate and other dower rights in the land.

4. That I am executing this release for the purpose of giving up my life estate and other dower rights in the land.

5. That I am executing this release freely and voluntarily without any compulsion on the part of my husband
(or wife).

SWORN before me at _____
in the _____
this ____ day of _____, _____

(Signature)

BARRISTER AND SOLICITOR

Affidavit of Attestation of an Instrument

Form 31
Land Titles Act
Sections 155 and 156

I, _____
of _____ in the _____

make oath and say:

1. I was personally present and did see

who is (are) known to me to be the person(s) named in the within instrument, duly sign the instrument;

OR

I was personally present and did see

who, on the basis of the identification provided to me, I believe to be the person(s) named in the within instrument, duly sign the instrument;

2. The instrument was signed at _____, in the _____
and I am subscribing witness thereto;

3. I believe the person(s) whose signature I witnessed is (are) at least eighteen (18) years of age.

SWORN before me at _____
in the _____
this ____ day of _____, _____

(Witness Sign Here)

(Print or Stamp Name of Commissioner)

(Expiry Date of Commission or Office)