

# Provincial Deed Transfer Tax Affidavit of Residence

Grantee Type: Corporation



An Affidavit of Residence is required for each grantee included in the property transaction. Information on this form will be used to validate residency and may be shared with other departments within the Province of Nova Scotia. Once the affidavit is completed, it must be uploaded (when prompted) to the online Provincial Deed Transfer Tax Form.

## Grantee Information - For Corporations

Corporation legal name

Corporation operating name

CRA Business number

Jurisdiction of incorporation

NS Registry of Joint Stocks number

or business registry number for another region

Head office address – Current address of head office

Suite/Unit – For example, 'Suite 100'

City/Town/Community

Province/Territory

Country

Postal Code

Contact person

Phone number

Email address

## Residency Declaration

Is the corporation's central management and control located in Nova Scotia?

Yes  No

To the best of your information and belief, are 50% or more of the corporation's directors residents of Nova Scotia for income tax purposes?

Yes  No

To the best of your information and belief, if the corporation

(a) is limited by shares: Are 50% or more of the corporation's issued and outstanding shares (by votes or value) owned by residents of Nova Scotia for income tax purposes?

(b) consists of members: Are 50% or more of the members residents of Nova Scotia for income tax purposes?

Yes  No

I have answered 'yes' to the 3 questions above. I declare that the corporation **is a Nova Scotia Resident**.

I have answered 'no' to at least 1 of the 3 questions above. I declare that the corporation **is not a Nova Scotia Resident**.

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- I, , make oath/affirm that I am an authorized agent of the grantee named above and I have personal knowledge of the facts and information in this affidavit and they are true.
- I consent the Department of Finance and Treasury Board to use the information above (including the business number) to verify the corporation's residency status.
- I consent the Department of Finance and Treasury Board to share the information above (other than the business number) across other departments within the Province of Nova Scotia as needed.

(Severally) sworn/affirmed at  in the County of

Province of Nova Scotia, this  day of ,  (year) before me.

**Authorized Officer of the Corporation signature**

**Date**

**Barrister, commissioner, or notary public signature**

**Date**