FORM 006

File Number (if known): **Court Location:**

SWORN STATEMENT IN SUPPORT OF APPLICATION FOR SUBSTITUTED/DISPENSING WITH SERVICE

In support of my application attached I, _____, make oath and say/or solemnly affirm as follows:

(State reasons in full why substituted service is necessary or why it is impracticable to effect service thus requiring to dispense with service. Include circumstances of any unsuccessful attempts at service).

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

(*State the method of substituted service you are proposing and why).*

_____
_____
_____
_____
_____

SWORN/AFFIRMED before me
at _____ in the
province of Newfoundland and Labrador
this ____ day of _____ 20___.

_____
Applicant

_____
A Person Authorized to Administer Oaths