



## Personal Affidavit and Indemnity Agreement

This form is to supplement estate settlement requests to;

- 1) Waive probate where the combined equity of all accounts of the deceased have a total market value of **less** than \$75,000
- 2) Waive the requirement of Letters of Administration or The Certificate of Appointment of an Estate Trustee with a Will where the individual circumstance / settlement request has received pre approval to accept this form.

This form is to be completed by Residents of Canada and /or authorized individuals of Introducing Brokers and Investment Counselors.

**1- I, (We)**

residing at

In the City of

In the Province / State of

being of lawful age, and being duly sworn do depose and say:

**2- That I am (we are) acting as:**

(a) administrator(s)

(b) executor(s)

(c) testamentary beneficiary(ies)

(d) legal heir(s)

for the estate of \_\_\_\_\_ and in my (our) personal capacity(ies).

**3- That the deceased died at \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.**

(a) ☐ Without leaving a will, and the sole surviving heirs-at-law are:

Name	Relationship	Age

(b) ☐ Having left a will dated \_\_\_\_\_ a true copy of which is attached hereto and that the Will has not be probated and the beneficiaries under said Will are the following:

Beneficiary(ies)	

- 4- That all debts and claims against the said estate have been paid or settled or by the undersigned.
- 5- To the best of my/our knowledge and belief, there are no other assets of the deceased, real or personal other than as follows: (List of assets to be released).
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- 6- Upon receipt of the total assets of the deceased held with NBCN Inc. I/We hereby fully and forever release NBCN Inc. from any and all rights or claims, present or future, absolute or contingent, that I/we or the Estate may have.
- 7- I/We hereby agree, undertake, and covenant to save harmless and to fully indemnify NBCN Inc. of any claim, suite, cause of action, damages or penalties of any kind that may be incurred, suffered or occasioned by it in connection with the Estate of \_\_\_\_\_ or dealings with its assets or monies.

Signed at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

	Full Name	Signature
<b>To be signed by all Executors, Heirs-at- law and Beneficiaries</b>		

Sworn before me, at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_.

\_\_\_\_\_  
**Commissioner for Oaths or Notary Public**  
**(affix notarial seal)**