



City of Ottawa, 100 Constellation Drive Ottawa,
ON K2G 6J8
Recreation, Cultural and Facility Services Department
namingottawa@ottawa.ca

**MUNICIPAL PARK, FACILITY, ASSET WITHIN A PARK OR FACILITY, OR STREET –
COMMEMORATIVE NAMING**

To be completed by the Nominator, Next of Kin, or Close Acquaintance to the
Nominee (applicable if the nominee is deceased)

AFFIDAVIT OF _____
(Print name of Nominator, Next of Kin, or Close Acquaintance)

I, _____
(Name of Nominator, Next of Kin, or Close Acquaintance)

of the City of Ottawa, in the Province of Ontario, MAKE OATH AND SAY THAT
TO THE BEST OF MY KNOWLEDGE, _____:
(Name of nominee)

1. Was never convicted of an offence as set out in a Federal Statute.
2. Does not have any outstanding convictions or infractions as set out in the
Provincial Offences Act and/or any City of Ottawa Municipal By-laws.
3. I make this Affidavit in support of the Application Form for the
Commemorative Naming Policy, City of Ottawa, and for no improper
purpose.

SWORN BEFORE ME at the)
City of Ottawa, in the)
Province of Ontario,)
this ___ day of _____, 202__)

(Nominator, Next Of Kin, or Close acquaintance)

A commissioner, etc.