



In the matter of the \_\_\_\_\_ ACT and in the matter of an application  
by \_\_\_\_\_ for replacement of an identification plate.

I, \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_  
Province of \_\_\_\_\_, do solemnly declare:

1. That I am the \_\_\_\_\_ and have knowledge of the facts herein sworn to.  
*Applicant, or agent, officer, or solicitor of the applicant*
2. That the identification plate number \_\_\_\_\_ issued by the Nova Scotia Regulatory and Appeals Board  
for \_\_\_\_\_ has been lost or destroyed  
*kind, year of manufacture, maker's name and serial number*  
under the following circumstances, namely \_\_\_\_\_  
\_\_\_\_\_
3. That the said \_\_\_\_\_ hereby applies for the issue of  
a new identification plate to replace the plate lost or destroyed.

**And I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force  
and effect as if made by me under oath and by virtue of the Canada Evidence Act.**

**Declared Before Me**

at \_\_\_\_\_

in the County of \_\_\_\_\_

Province of \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_ before me

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\_\_\_\_\_  
*Notary Public or Commissioner*

\_\_\_\_\_  
*Signature of Applicant*

## **Submit to:**

Completed forms can be securely sent to us through our “Send Files to the Board” feature of our website at **TitanFile Secure Submit**.

Forms can also be printed and sent by regular mail to the following address:

**Nova Scotia Regulatory and Appeals Board**

**1601 Lower Water Street, Suite 300 PO Box 1692, Unit “M”**

**Halifax, Nova Scotia B3J 3S3**

If you require assistance you can contact the board at:

Tel: **902-424-1333**

Fax: **902-424-3919**

Email: **[board@novascotia.ca](mailto:board@novascotia.ca)**