

Court File Number

(Name of Court)

at

Court office address

**Form 23C: Affidavit for  
Uncontested Trial, dated**

**Applicant(s)**

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).


Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).


**Respondent(s)**

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).


Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).


**My name is** (full legal name) \_\_\_\_\_

**I live in** (municipality and province) \_\_\_\_\_

**and I** that the following is true:

1. I am the applicant in this case.

2. There (number) \_\_\_\_\_ child(ren) from our relationship, namely:

Full Legal Name	Age	Birthdate (d, m, y)	Resident in (municipality & province)	Now living with (name of person and relationship to child)

3. I am asking for the following order:

- ☐ custody of the child(ren) named above
- ☐ access to the child(ren) named above
- ☐ support for (name of recipient(s)) \_\_\_\_\_
- ☐ a restraining order against the respondent (name) \_\_\_\_\_  
(date of birth) \_\_\_\_\_
- ☐ other (specify) \_\_\_\_\_

4. The respondent and I were:

- ☐ married on (date) \_\_\_\_\_
- ☐ separated on (date) \_\_\_\_\_
- ☐ started living together on (date) \_\_\_\_\_
- ☐ never lived together.

**CUSTODY AND ACCESS**

Fill out this section if you are claiming custody of one or more of the children.

5. An order giving me custody of the child(ren) is in the best interests of the child(ren) because: *(Give reasons.)*

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6. An order giving the respondent access to the children

☐ is ☐ is not

in the best interests of the child(ren) because: *(Give reasons.)*

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7. If an order for access is made, it should be:

☐ reasonable access on reasonable notice;

☐ reasonable access on reasonable notice including but not limited to the terms below:

☐ on the following terms:

☐ every other weekend from \_\_\_\_\_ p.m. on Friday until \_\_\_\_\_ p.m. on

Sunday or Monday, if Monday is a statutory holiday, starting on *(date)* \_\_\_\_\_

☐ alternate spring breaks, starting in *(year)* \_\_\_\_\_.

☐ \_\_\_\_\_ weeks during the summer vacation, to be decided by the parties before April 1 of each year.

☐ one half of the winter break, starting on *(date)* \_\_\_\_\_ and ending  
on *(date)* \_\_\_\_\_ to be shared as follows:

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☐ List any other special days such as religious festivals, Christmas Day, birthdays, Mother's Day, Father's Day, etc., and indicate with which person the children will be on each day. *(Specify dates and times.)*

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☐ other *(Specify.)*

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**CHILD SUPPORT**

Fill out this section if you are claiming child support.

8. I am claiming support for (number) \_\_\_\_\_ child(ren).

9. To the best of my knowledge, the source(s) of the respondent's income is (Check one or more boxes as circumstances require.)

☐ employment income at (employer's name and address)

\_\_\_\_\_

☐ commissions, tips, overtime, bonuses, etc.

☐ self-employment as (name or nature of respondent's business)

\_\_\_\_\_

☐ other (Specify.)

\_\_\_\_\_

10. I believe that the respondent's current annual income from all income sources is \$ \_\_\_\_\_ for the following reasons: (Give your reasons for believing the dollar amount set out.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPOUSAL SUPPORT**

Fill out this section if you are claiming support for yourself.

11. I need spousal support for the following reasons: (Give details of your financial needs.)

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\_\_\_\_\_  
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**RESTRAINING ORDER**

Fill out this section if you are claiming a restraining order against the respondent.

**12.** I need an order to restrain the respondent (*full legal name of person restrained*) \_\_\_\_\_

(*date of birth of person restrained*) \_\_\_\_\_ from

- ☐ a) contacting or communicating directly or indirectly with the following people (*full legal name and date(s) of birth of person[s] protected by this order*)

Name	Birthdate (d, m, y)

- ☐ except through (*name of person or agency*) \_\_\_\_\_  
to arrange access to the child(ren).

- ☐ except to permit access to the child(ren) (*names and birthdates*) \_\_\_\_\_

on (*dates/days and times*) \_\_\_\_\_

- ☐ except through or in the presence of counsel.

- ☐ except through or in the presence of counsel or a clinical investigator from the Office of the Children's Lawyer, if the Children's Lawyer is appointed to represent the child(ren).

- ☐ b) coming within \_\_\_\_\_ ☐ metres ☐ yards ☐ feet of (*locations and addresses*)

at any time or for any purpose

- ☐ except under the following conditions: (*provide details of conditions, including time(s), purpose(s) of exception(s) and address(es) as applicable*)

- ☐ c) (*any additional terms*)

I need a restraining order for the following reasons:

**LACK OF SERVICE**

Fill out this section if the respondent is not going to be served or has not been served.

**NOTE:** The Family Law Rules require all documents to be served on the opposing party. *The court will make an order even without service, but only in very unusual circumstances such as:*

1. *An emergency situation where there is not enough time to serve documents or where serving them would put you or your child in danger or would have other serious consequences.*
2. *Where the court is satisfied that every effort has been made to find the other party and that it is impossible to serve him or her by any means.*

13. My application/motion is not being served on the respondent for the following reasons:

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**OTHER ISSUES**

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Put a line through any blank space left on this page.

\_\_\_\_\_ before me at \_\_\_\_\_  
\_\_\_\_\_ municipality  
in \_\_\_\_\_  
\_\_\_\_\_ province, state or country  
on \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Commissioner for taking affidavits  
(Type or print name below if signature is illegible.)

\_\_\_\_\_  
Signature  
(This form is to be signed in front of a  
lawyer, justice of the peace, notary public  
or commissioner for taking affidavits.)