



Government Services
Motor Registration Division
Tel: (709) 729-0100
Toll Free: 1 (877) 636-6867
Fax: (709) 729-0102

AFFIDAVIT

I, _____ of _____

in the Province of Newfoundland and Labrador do hereby make oath and say that I have been an

☐ Auto Body Repairperson or ☐ Motor Vehicle Repairperson

for five years or more and consider myself competent to inspect motor vehicles for the
purpose of certifying motor vehicles as meeting the requirements for registration under the
Highway Traffic Act and Regulations.

Sworn before me at _____

in the Province of _____

this _____ day of _____, 20 _____

Justice of the Peace/Commissioner of Oaths
for Newfoundland and Labrador.

Mechanic's / Auto Body Repairperson's Name _____

Mechanic's / Auto Body Repairperson's Address _____

Mechanic's / Auto Body Repairperson's Driver's Licence No. _____

Mechanic's / Auto Body Repairperson's Signature _____

Name of Station _____

Station Number _____

REFERENCES:

Name _____ Name _____

Address _____ Address _____

Name _____ Name _____

Address _____ Address _____

E-mail: ois@gov.nl.ca

Mailing Address: P.O. Box 8710, St. John's, Newfoundland and Labrador, A1B 4J5
Office Address: 149 Smallwood Drive, Mount Pearl, Newfoundland and Labrador, A1N 1B5