



# RESIDENTIAL TENANCIES ACT

Government of Newfoundland and Labrador  
Department of Government Services

Application Number: \_\_\_\_\_

## AFFIDAVIT OF SERVICE

I, \_\_\_\_\_ of \_\_\_\_\_, Newfoundland and Labrador, make oath or affirm  
 and say that on \_\_\_\_\_ the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ at  
 approximately \_\_\_\_\_  a.m. \_\_\_\_\_  p.m. I served \_\_\_\_\_  
 with a **TRUE COPY** of: (Check Applicable box)  
 **Claim & Notice of Hearing**       **Order and Decision**       **Notice of Re-scheduled Hearing**  
 **Copy of Certified Order**       **Reconsideration Order**       **Other:** \_\_\_\_\_

The above noted individual(s) have been served as indicated below (Check applicable box):

a)  personally    **Address:** \_\_\_\_\_.

b)  by serving same on (Name - Print) \_\_\_\_\_, who is sixteen years of age or older and apparently lives with the Respondent or who is an employee of the Respondent and whose official capacity is \_\_\_\_\_.  
**Address:** \_\_\_\_\_

c)  by sending same via  **Registered Mail**     **Express Post**     **Courier**  
**Receipt No./Bill of Lading** \_\_\_\_\_.  
**Address:** \_\_\_\_\_.

d)  by **Order of Substituted Service**. I did \_\_\_\_\_  
 \_\_\_\_\_ and a copy of the Order of Substituted Service was attached.

**SWORN OR AFFIRMED** before me at \_\_\_\_\_  
in the Province of Newfoundland and Labrador, this \_\_\_\_\_ day  
of \_\_\_\_\_ 201\_\_\_\_.

\_\_\_\_\_  
**Justice of the Peace, Notary Public**  
**Commissioner for Oaths**

\_\_\_\_\_  
**Signature**

**THIS AFFIDAVIT APPLIES TO THE HEARING SCHEDULED ON**

## PROCEDURE FOR SERVICE OF CLAIM

**EACH RESPONDENT NAMED IN THE CLAIM MUST BE SERVED INDIVIDUALLY** with a copy of the claim **at least ten days** prior to the date of the hearing. The purpose is to ensure each respondent will be made aware of the hearing date and what the claim is about.

**The claim may be served on each respondent by:**

- \* **personal service;**
- \* **registered mail, courier service or express post;**
- \* **serving an adult 16 years or older who lives with the respondent.**

### **AFFIDAVIT OF SERVICE IS REQUIRED PRIOR TO HEARING DATE:**

The person who served the document(s) must complete and swear to an affidavit of service for each respondent served. The affidavit must state the name of the person served, the address of service, as well as the date and time of service.

### **SERVICE BY REGISTERED MAIL/EXPRESS POST REQUIRES:**

**The registered mail/express post number** for the affidavit of service as well as the date and time the document was sent by registered mail/express post.

**Delivery confirmation** prior to the hearing in order to establish that each respondent (or their representative) signed for their registered mail containing the document. This may be obtained via the internet at [www.canadapost.ca](http://www.canadapost.ca) or by calling 1-888-550-6333 to obtain a copy of the signature.

If sending the claim by registered mail/express post, it is the applicant's responsibility to ensure that sufficient time is allowed for a respondent to receive the document at least 10 days before the scheduled hearing date.

**If the above methods of service are not successful, you may complete an application for substituted service at a Residential Tenancies Section nearest you.**

### **Department of Government Services Residential Tenancies Section**

Government Service Centre  
5 Mews Place  
P.O. Box 8700  
St. John's, NL A1B 4J6  
Phone: 729-2610/2608  
Fax: 729-6998

Government Service Centre  
230 Airport Blvd., Fraser Mall  
P.O. Box 2222  
Gander, NL A1V 2N9  
Phone: 256-1019  
Fax: 256-1438

Government Service Centre  
133 Riverside Drive, Noton Bldg.  
P.O. Box 2006  
Corner Brook, NL A2H 6J8  
Phone: 637-2445  
Fax: 637-2905

**Toll Free 1-877-829-2608 (St. John's)**

For more information about our Division, copies of forms and other information, visit our website at the following address:

[www.gs.gov.nl.ca/cca/tp/residential-tenancies](http://www.gs.gov.nl.ca/cca/tp/residential-tenancies)