



# Inquiry Into the City of Perth

GOVERNMENT OF  
WESTERN AUSTRALIA

## AFFIDAVIT

NO:      OF 20

**Affidavit of:**  
*(name of deponent)*

**Address:**

**Occupation:**

### Details of affidavit

**Made on behalf of:**  
*(Name the person or applicant on whose behalf the affidavit was made)*

**Filed in support of:**  
*(Refer to the application that the affidavit supports and include the date of the application)*

**Date affidavit was sworn/affirmed:**

### Affidavit prepared by:

Name:

Firm:

Street Address:

Telephone No:

Fax No:

Email address:

Reference No.

**Signature of applicant or lawyer**

.....  
Applicant / Applicant's lawyer

Date:

# AFFIDAVIT

[\*Insert table of contents if affidavit (including annexures) exceeds 10 pages]

**Contents**

Document number	Details	Paragraph	Page
1	Affidavit of [deponent]		
2	Annexure “[AB1]”, being copy of [brief description]		
3	Annexure “[AB2]”, being copy of [brief description]		

I [name address and occupation] [\*either]say on oath [\*or]affirm:

1. [State which answers are true based on your own knowledge and which are true to the best of your knowledge, information and belief based on your inquiries of relevant persons].

**[Insert headings to identify subject matter in paragraph(s).]**

2.

(a)

3.

Sworn / Affirmed by the deponent )  
 at [place] )  
 in [State or Territory] )  
 on [date] )  
 Before me: )

.....  
 Signature of deponent

.....  
 Signature of witness

[Name and qualification of witness]

[\* Delete if inapplicable]