**Form 15-49**

(Rule 15-49)

|  |  |
| --- | --- |
| COURT FILE NUMBER | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| COURT OF QUEEN’S BENCH FOR SASKATCHEWAN  (FAMILY LAW DIVISION) | |
| JUDICIAL CENTRE | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PETITIONER | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| RESPONDENT | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**PROPERTY STATEMENT OF** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **INFORMATION NOTE** |
| This Form provides information regarding property and debts as of the date on which the Petition initiating a property claim was issued or the Counter-Petition initiating a property claim was filed (the “date of application”). You must identify all property owned, or in which an interest was held, by one or both spouses, or by one or both spouses and a third person, on that date. Each section of this form has instructions (*in italics*). |
| You must swear/affirm this Property Statement in front of a notary public, justice of the peace, lawyer or commissioner for oaths. The staff members at the Local Registrar's Office in the Court House are commissioners for oaths so you may swear/affirm the document in front of a staff member at the time of filing. |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ swear (*or* affirm) that:

(*name*) (*city/town and province*)

**1** The date of application is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

**2** The information set out in this Property Statement is true and complete to the best of my knowledge and belief, and sets out all family property owned, or in which an interest was held, by one or both spouses, or by one or both spouses and a third person, as of the date of application.

**3** I acknowledge that if, in the course of this proceeding, I discover that this information is incorrect or incomplete, I must serve on every other party to this proceeding and file with the Court the correct or complete information, or a new Property Statement with updated information.

|  |  |  |
| --- | --- | --- |
| SWORN (OR AFFIRMED) BEFORE ME |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (*signature*) |
| at, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , Saskatchewan, |
| this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , |
| 2 \_\_\_\_\_\_ . |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| A Commissioner for Oaths for Saskatchewan |

**I. ASSETS IN OR OUTSIDE SASKATCHEWAN**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1: REAL PROPERTY** | | | | | |
| *INSTRUCTIONS: List the interests in real property owned by one or both spouses, or by one or both spouses and a third person, on the date of application, including leasehold interests and mortgages. Show estimated fair market value of the interest. Do not deduct encumbrances or costs of disposition; rather, show them under Part II: Debts and Liabilities. For example, for the family home, you might insert both spouses' names in the first column and "Joint tenancy" in the second column; in the next column, you might write "Family home, 123 Main Street"; in the fifth column the market value on the date of application, and in the last column the current market value. Show any amount left to pay on the mortgage under Part II: Debts and Liabilities.* | | | | | |
| **Owner** | **Nature and Type of Ownership** | **Nature of property and address** | **Estimated TOTAL Value** | **Estimated Fair Market Value of the Interest** | |
| **on date of application** | **on current date** |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
| **TOTAL VALUE OF REAL PROPERTY** | | | | $ | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2: GENERAL HOUSEHOLD GOODS AND VEHICLES** | | | | |
| *INSTRUCTIONS: List the estimated market value, not the cost of replacement, for general household goods and vehicles owned by one or both spouses, or by one or both spouses and a third person, on the date of application. Do not deduct encumbrances or costs of disposition; rather, show them under*  *Part II: Debts and Liabilities.* | | | | |
| **Item** | **Description** | **In the possession of** | **Estimated Fair Market Value** | |
| **on date of application** | **on current date** |
| Household goods, appliances , furniture |  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
| Cars, boats, trailers, motorhomes, snowmobiles, other vehicles |  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
| Jewellery, works of art, collections, electronics, tools, sports and hobby equipment |  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
| Other items |  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
| **TOTAL VALUE OF GENERAL HOUSEHOLD GOODS AND VEHICLES** | | | $ | $ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **3: BANK ACCOUNTS AND SAVINGS** | | | | | |
| *INSTRUCTIONS: List, by category, the items owned by one or both spouses, or by one or both spouses and a third person, on the date of application. Include cash, savings and chequing accounts in financial institutions, term deposits, guaranteed investment certificates, TFSAs, RESPs, and all other savings.* | | | | | |
| **Owner** | **Category** | **Institution** | **Account Number** | **Amount** | |
| **on date of application** | **on current date** |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
| **TOTAL VALUE OF BANK ACCOUNTS AND SAVINGS** | | | | $ | $ |

The location of any safety deposit box[es] is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(*name and address of institution(s)*)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **4: PENSIONS AND RETIREMENT SAVINGS PLANS** | | | | | |
| *INSTRUCTIONS: List plans owned by one or both spouses. Indicate the name and address of the institution where* a *Registered Retirement Savings Plan is held; include name and address of pension plan and pension details.* | | | | | |
| **Owner** | **Category** | **Institution** | **Account Number** | **Amount** | |
| **on date of application** | **on current date** |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
| **TOTAL VALUE OF PENSIONS AND RETIREMENT SAVINGS PLANS** | | | | $ | $ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **5: SECURITIES (INCLUDING VALUE OF SHARES IN A CORPORATION)** | | | | | |
| *INSTRUCTIONS: List the interests that each spouse holds, directly or indirectly, in any incorporated business. Include shares, bonds, mutual funds, warrants, options, debentures, notes and all other securities. List the items by category. Give your best estimate of market value if the item were to be sold on the open market.* | | | | | |
| **Owner** | **Category** | **Description (including name of corporation)** | **Number** | **Estimated Fair Market Value** | |
| **on date of application** | **on current date** |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
|  |  |  |  | $ | $ |
| **TOTAL VALUE OF SECURITIES** | | | | $ | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **6: BUSINESS INTERESTS** | | | | |
| *INSTRUCTIONS: List the interests that each spouse holds, directly or indirectly, in any unincorporated business, including partnerships, trusts and joint ventures. Give your best estimate of market value if the business were to be sold on the open market. An interest in an incorporated business should be shown under Table 5: Securities.* | | | | |
| **Owner** | **Name of Firm or Company** | **Interest** | **Estimated Fair Market Value of the Interest** | |
| **on date of application** | **on current date** |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
| **TOTAL VALUE OF BUSINESS INTERESTS** | | | $ | $ |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **7: LIFE & DISABILITY INSURANCE** | | | | | | |
| *INSTRUCTIONS: List only those insurance policies owned by one or both spouses, or by one or both spouses and a third person, that have a property value / cash surrender value. Do not include term policies.* | | | | | | |
| **Owner** | **Company and Policy No.** | **Kind of Policy** | **Beneficiary** | **Face Amount** | **Cash Surrender Value** | |
| **on date of application** | **on current date** |
|  |  |  |  |  | $ | $ |
|  |  |  |  |  | $ | $ |
|  |  |  |  |  | $ | $ |
|  |  |  |  |  | $ | $ |
|  |  |  |  |  | $ | $ |
| **TOTAL CASH SURRENDER VALUE OF INSURANCE POLICIES** | | | | | $ | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **8: OTHER PROPERTY** | | | | |
| *INSTRUCTIONS: List, by category, all other property and assets owned. Include property of any kind not listed in Tables 1 to 8 (for example, cash on hand, accounts receivable, patents or copyright claims). Give your best estimate of market value.* | | | | |
| **Owner** | **Category** | **Details** | **Estimated Fair Market Value of the Interest** | |
| **on date of application** | **on current date** |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
| **TOTAL VALUE OF OTHER PROPERTY** | | | $ | $ |

|  |  |  |
| --- | --- | --- |
| **SUMMARY** | | |
| *INSTRUCTIONS: Record the above totals from Tables 1 to 8 for the date of application and add together*. | | |
| 1. | REAL PROPERTY | $ |
| 2. | GENERAL HOUSEHOLD GOODS AND VEHICLES | $ |
| 3. | BANK ACCOUNTS AND SAVINGS | $ |
| 4. | PENSIONS AND RETIREMENT SAVINGS PLANS | $ |
| 5. | SECURITIES | $ |
| 6. | BUSINESS INTERESTS | $ |
| 7. | CASH SURRENDER VALUE OF INSURANCE POLICIES | $ |
| 8. | OTHER PROPERTY | $ |
| **I. TOTAL VALUE OF ASSETS ON DATE OF APPLICATION** | | $ |

**II. DEBTS AND LIABILITIES**

|  |
| --- |
| *INSTRUCTIONS: List all debts and other liabilities that you owe, that your spouse owes or that either of you owe along with another person, on the date of application. List by category, such as mortgages, charges, loans, liens, notes, credit cards, accounts payable, tax arrears and costs of disposition. Indicate if any other persons may be responsible for this debt and give their names. Include contingent liabilities such as guarantees given by either spouse, and indicate that they are contingent.* |

| **Type of  Debt** | **Owed**  **by** | **Owed to (name and address)** | **Full amount owing on date of application** | **Monthly payments** | **Are payments being made?** | **If yes, by whom?** |
| --- | --- | --- | --- | --- | --- | --- |
| Secured against real property (mortgages, lines of credit, etc.) |  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
| Loans from a bank, trust or finance company |  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
| Credit card balances |  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
| Unpaid support amounts |  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
| Other debts |  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
|  |  | $ | $ |  |  |
| **II. TOTAL AMOUNT OF DEBTS AND LIABILITIES** | | | | | $ | |

**III. EXEMPTIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| **PROPERTY CLAIMED AS EXEMPT FROM DISTRIBUTION** | | | |
| *INSTRUCTIONS: List all property reported in this statement that was owned on the date of application and that you claim is exempt from distribution pursuant to sections 23 and 24 of The Family Property Act.* | | | |
| **Category** | **Item and Reasons for Exemption** | **Value on Date of Application** | **Value of Exemption Claimed** |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
| **III. TOTAL CLAIM FOR EXEMPTIONS** | | $ | |

**IV. DISPOSED PROPERTY**

|  |  |  |  |
| --- | --- | --- | --- |
| **PROPERTY DISPOSED OF WITHIN TWO YEARS** | | | |
| *INSTRUCTIONS: List all property sold, gifted or otherwise disposed of within two years of the date of application. Indicate the date of disposition of each item and the value of each item as of the date of disposition.* | | | |
| **Description** | **Date disposed of** | | **Value** |
|  |  | | $ |
|  |  | | $ |
|  |  | | $ |
|  |  | | $ |
|  |  | | $ |
|  |  | | $ |
| **IV. TOTAL VALUE OF DISPOSED PROPERTY** | | $ | |

**V. SUMMARY**

|  |  |  |
| --- | --- | --- |
| **SUMMARY** | | |
| *INSTRUCTIONS: Record the above totals from Parts I to IV.* | | |
| 1. | Total value of assets on date of application | $ |
| 2. | Total amount of debts and liabilities | $ |
| 3. | Total claim for exemptions | $ |
| 4. | Total value of disposed property | $ |