

## SECURE CERTIFICATE OF INDIAN STATUS STATUTORY DECLARATION CONCERNING A LOST, STOLEN, DAMAGED OR DESTROYED SCIS

## Privacy Act Statement

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Pursuant to Aboriginal Affairs and Northern Development Canada's policy regarding the processing of Secure Certificates of Indian Status (SCIS) applications, "a registered Indian shall have only one valid Certificate of Indian Status (CIS) or SCIS at any one time". It is therefore necessary to submit this statement with an application for a new SCIS when a previous SCIS cannot be presented.

## NOTICE TO ALL APPLICANTS

The SCIS remains at all times the property of the Government of Canada and must only be used by the person whose name it is issued. Any false or misleading statements on this form or relating to any document in support of this application, including concealment of any material fact, selling a SCIS or permitting any other individual or agency to use your SCIS may lead to criminal prosecution and is cause for revocation of the SCIS and refusal of any future SCIS.

A Applicant Information (Complete in block letters using black or dark blue ink)						
Family Name (Last Name)	Given Name(s)					
Complete the following only if Statutory Declaration is in support of	a Child/Dependent Adult Application (83-108E/83-131E)					
Child/Dependent Adult's Family Name (Last Name)	Child/Dependent Adult's Given Name					
Date of Birth (YYYYMMDD)						
Indian Registry No.						
(For Adult Application include applicant's Registry No., for Child/Dependent Adult Application include						
child/dependent adult's Registry No.)						
(Continue on Page 2)						
INTER 83-113E 2012-10-01 7530-20-005-9358	Canadä					



B Applicant Declaration							
I hereby declare that:							
1. the SCIS No.	1. the SCIS No, issued						
in my name or							
in the child's name/name of dependent adult							
became Lost	Stolen	Da	Damaged Destroyed on				
Approximate Date (YYYYMMDD)	ocation						
under the following circumstances (provide a full and detailed explanation including details regarding the last time the card was seen or used):							
2. I have made the following efforts to locate my SCIS:							
If stolen, a police claim has been filed wit	h						
			Office, Location and Te				
on Police Claim No							
3. I declare that I have not given my SCIS to another person or disposed of it in an unauthorized manner, that a SCIS, once reported lost, stolen, damaged or destroyed, is no longer valid and is not to be used further. Should I regain possession of the above-noted SCIS I understand that I am to return it immediately to the nearest AANDC Regional or District Office.							
DECLARATION: I solemnly declare that	nt, to my knowledge, the s	tatements	made in this declara	ation are true.			
Signed at (Location)	Province/Territory/State	Signatur X			Date (YYYYMMDD)		
This form must be completed and signed before a qualified official who has the authority to administer an oath or solemn declaration							
C Official Information and Declaration Commissioner for Oaths Notary Public Lawyer					Lawyer		
Family Name (Last Name)							
Given Name(s)			Telephone No. (Daytime) ( )				
Business Name, Address or Permanent Residence Address Number/Street/Apartment/P.O.Box City/Town		Province/Territory/Sta	te Postal/ZIP Code				
Declaration made before me on	Date (YYYYMMD	D)	Signature of Officia X	I (Affix stamp)			
Signed at (Location)	Province/Territo	ory/State					

