



Important

- Complete **all sections** of the form in block letters, in black or blue ink.
- Include a photocopy of a certificate, a copy of an act or a valid attestation of death that will allow us to establish the death of the person.
- **Sign** and **date** section 3.

The liquidator of the succession is the one appointed in the will of the deceased. If the will does not designate a liquidator of the succession or the person died without a will, the liquidator is the one who represents the heirs.

Send the request using one of the following methods:

By mail
Service d'immatriculation des armes à feu du Québec
2535, boulevard Laurier
Québec (Québec) G1V 5C6

By secure email
Québec.ca/siaf (Contact the SIAF section)

Section 1: Information on the deceased

1. Last name		2. First name			3. Date of birth Year Month Day			4. Date of death Year Month Day		
5. Home address (number, street)				Apartment	6. City					
7. Province				8. Postal code			9. Country			

Section 2: Information on the liquidator of the succession

10. Last name				11. First name							
12. Home address (number, street)				Apartment	13. City						
14. Province				15. Postal code			16. Country				
17. Area code Telephone				18. Email, if applicable							

Section 3: Declaration of the liquidator of the succession

19. If you are the liquidator appointed by the will, check the box corresponding to your situation.

I am the only liquidator of the succession.

I am one of the liquidators of the succession and I act together with the other liquidators, or I am exempted.

I declare that the necessary research has been carried out and that the will under which I act is the last and only valid will of the deceased.

I solemnly declare that, to the best of my knowledge, the information provided herein is accurate.

X _____
Mandatory signature of the liquidator of the succession Date (year-month-day)

20. If you are the representative of the heirs (with or without will), check the box corresponding to your situation.

I declare that I represent all the heirs and that I act with their consent.

I also declare that I have carried out the necessary research and:

that the will under which I act is the last and only valid will of the deceased, and that no liquidator is appointed therein.

in my capacity as representative, that the deceased left no will.

I solemnly declare that, to the best of my knowledge, the information provided herein is accurate.

X _____
Mandatory signature of the heirs' representative Date (year-month-day)