

REQUEST FOR AN ATTESTATION FOR THE PURPOSE OF RESILIATING A LEASE ON GROUNDS OF SEXUAL VIOLENCE, SPOUSAL VIOLENCE OR VIOLENCE TOWARDS A CHILD LIVING IN THE DWELLING COVERED BY THE LEASE

(s. 1974.1 Civil Code of Quebec)

	SECTION 1				
□ Mr. □ Ms. □ Other	Surname	First	name		
How can yo	ou be reached?				
☐ At the foll	owing address				
☐ Through	the following person:				
SURNAME:	FIRST NAME:				
Your curre	nt address [or the address of the person indicated above]				
No. and street	-		Apt.		
Municipality			Postal code		
Home telephor	ne		Work telephone		
THE DWEL	LING FOR WHICH YOU ARE SEEKING THE RESILIATION				
1. Address					
No. and street			Apt.		
Municipality Postal code					
2. Owner or owner's representative					
Surname			First name		
No. and street			Apt.		
Municipality			Postal code		
Home telephone			Work telephone		
3. Term of current lease					
	and the Later with the Arman		Start of lea	ase	
	an indeterminate term	year	r month	day	
□ lease of less than 12 months □ lease of 12 months or more □ lease					
⊔ lease of	12 months or more	year		day	
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4. Are you	the only person who has signed the lease with the owner?
Yes □	No □
	1. Who has also signed the lease with you as co-lessee?
	Surname: First name:
	2. What is your relationship with that person? □ partner □ ex-partner □ other (state):
5. Attach a	copy of the lease
	SECTION 2 DESCRIPTION OF THE FACTS
Describe the a request.	cts of sexual violence, spousal violence or violence towards a child living in the dwelling covered by the lease that motivate your
	Do not fill in this section if
	the situation or facts you
	describe have been
	reported to the police

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P	SECTION 3 OLICE INTERVENTION
Concerning the facts that occurred, have	you made a complaint to the police or has the police intervened?
YES □	NO □
Event or reference No.	Police department
Investigator	Approximate date on which the police intervened
If your safety or the safety of a child living with	
- is threatened because of spousal viole	
- is threatened because of sexual violen	ice, fill out Section 4.2 ; ards a child living in the dwelling covered by the lease, fill out Section
4.3;	ards a crilid living in the dwelling covered by the lease, fill out section
 is threatened by two or three of the sta your fears arising from the events. 	ated situations, fill out one of the corresponding section and state
	SECTION 4.1 OR YOUR SAFETY OR THE SAFETY OF A CHILD LIVING IN BY THE LEASE BECAUSE OF SPOUSAL VIOLENCE
In your own words describe the facts causing you by the lease based on the violence that you were	u to fear for your safety or the safety of a child living in the dwelling covered subjected to.
a couple, partner who does not accept the separareactions of the partner after earlier separation to kidnap child or children, threats of sui (shadowing, telephone calls, letters, e-mails, parole conditions, aggressiveness, impulsivity,	xperiencing any of the following situations: recent or imminent separation as ation, presence of a new partner, accelerated degradation of the relationship, s, death threats from the partner (to partner, child, other relative), threat cide, armed threats, expressed possibility of homicide, harassment social media, text, etc.), spousal control, violent acts, breach of instability, desire for revenge, depression, suicidal ideation, psychological possessiveness, jealousy, quick and unexplained change in attitude and a abuse problem.
Presence of children: YES □ NO Number: age(s):	□ Presence or availability of weapons: YES □ NO □ Do not know □
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SECTION 4.2

REASONS CAUSING YOU TO FEAR FOR YOUR SAFETY OR THE SAFETY OF A CHILD LIVING IN THE DWELLING COVERED BY THE LEASE BECAUSE OF SEXUAL VIOLENCE

In your own words describe the facts causing you to fear for your safety or the safety of a child living in the dwelling covered by the lease based on the sexual violence that you or the child has been subjected to. For example, one of the following situations may apply or all of them:

- You or the child has been sexually assaulted and the perpetrator knows the address of the dwelling, can have access to it or, lives or travels in the vicinity of your home (or your neighbourhood). The assault may have involved sexual touching (genitals, buttocks, breast), exhibitionism, voyeurism, luring, an attempt to impose sexual contact on you or on the child, threat of sexual assault.

	contact on you or on the child, threat of sexual assault.					
Number: age(s): YES NO Do not know Do no	Presence of children:	YES 🗆	NO 🗆	Presence or availability of weapons:		
	Number: age(s):			YES □	NO □	Do not know □
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SECTION 4.3 REASONS CAUSING YOU TO FEAR FOR THE SAFETY OF A CHILD LIVING IN THE DWELLING COVERED BY THE LEASE BECAUSE OF VIOLENCE TOWARDS HIM

In your own words, describe the facts causing you to fear for the safety of a child based on the violence that the child has been subjected to and the perpetrator knows the address of the dwelling, can have access to it or, lives or travels in the vicinity of your home (or your neighbourhood). For example, one of the following situations may apply or all of them:

- The child has been subjected to sexual abuse with or without physical contact, including any form of sexual exploitation. The assault may have involved sexual touching (genitals, buttocks, breast), exhibitionism, voyeurism, luring, an attempt to impose sexual contact on the child, threat of sexual assault.
- The child has already been physically assaulted or is at serious risk of being physically assaulted. This could include assault threats, harassment, bullving, etc.

accasi, imoato, narac	oment, sanying, etc.			
		Presence or availability of weapons:		
Number of children:	age(s):	YES □	NO □	Do not know □

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SECTION 5 OTHER RELEVANT INFORMATION			



	AUTHORIZATION				
	gned, hereby authorize the public officer to communi r whom I have parental authority, that is relevant to t				
	Declarant's name				
	OATH OR SOLEMN AFFI	RMATION			
I, the undersig	gned,				
	Declarant's oath (or solemnly affirm) that the facts set out in this				
	,				
	Declarant's signature				
Done at					
2 3113 411	city or town				
This					
	date				
	Name of the Commissioner for oaths				

DPCP_JANUARY 2023