

FORM 6

**SWORN AFFIDAVIT BY PERSON WHO INTENDS TO TRAVEL TO AND FROM
ANOTHER PROVINCE DURING ADJUSTED ALERT LEVEL 4**

Note: *This affidavit may only be sworn to or affirmed at a magistrate's court or police station.*

I,

Full names:					
Surname:					
Identity number					
Address of place of residence:					
Province of residence:					
Contact details:	Cell nr		Tel No (h)		e-mail address

Hereby declare under oath that I am moving to a new place of residence that requires travel across provinces during Adjusted Alert Level 4.

***OATH/AFFIRMATION**

I, _____ (full names), identity number _____, hereby declare under *oath/affirmation that the above-mentioned information is true and correct.

Signed at _____ on this _____ day of _____ 20____.

Signature of deponent

CERTIFICATION

I hereby certify that before administering the *oath/taking the affirmation, I asked the deponent the following questions and noted *his/her answers in *his/her presence as indicated below:

(a) Do you know and understand the contents of the above declaration?

Answer: _____

(b) Do you have any objection to taking the *oath/affirmation?

Answer: _____

I Do you consider the *oath/affirmation to be binding on your conscience?

Answer: _____

I hereby certify that the deponent has acknowledged that *he/she knows and understands the content of this declaration which was *sworn to/affirmed before me, and the deponent's signature was placed thereon in my presence.

Signed at _____ on this _____ day of _____ 20____.

*Justice of the Peace/Commissioner of Oaths

Full names: _____

Designation: _____

Business address: _____

*Delete which is not applicable