

Statutory Declaration of Spousal Relationship

Nov 2016



Use this form to prove your spousal status if you are:

- a HOOPP member living in a common law relationship with your qualifying spouse; or
- living in a common law relationship with a HOOPP member or pensioner who has passed away and you are applying for a survivor benefit; or
- a HOOPP member or spouse of a HOOPP member who is legally married but unable to provide supporting documents to prove your marriage

HOOPP defines a qualifying spouse as a person who, at the time of retirement or death (whichever occurs first):

1. is legally married to you, but not separated; or
2. has been living with you within a conjugal relationship continuously for at least a year; or is the mother or father (natural or adoptive) of your child, and lived with you in a relationship of some permanence.

Complete this form only if you have a qualifying spouse or are a qualifying spouse of a HOOPP member as defined by HOOPP.

1. Member information

Member name: _____ Date of birth: _____
(mm/dd/yyyy)

Member SIN: _____

Spouse name: _____ Date of birth: _____
(mm/dd/yyyy)

2. Common law or marital information

(To be completed by member at retirement or qualifying spouse of a HOOPP member who is applying for a benefit upon the death of a HOOPP member.)

I, _____ solemnly declare that my spouse and I are **not** living separate and apart and:
(name)

We are legally married to each other. Date of marriage: _____
(mm/dd/yyyy)

or

We have lived in a continuous conjugal relationship for a period of one year or more, or in a relationship of some permanence and are the natural or adoptive parents of a child as defined in the Family Law Act (Ontario).

The date we began living together in a continuous conjugal relationship was: _____
(mm/dd/yyyy)

3. Applicant declaration (To be signed by member or qualifying spouse, as applicable)

By signing below I hereby declare that the information on this declaration is true and complete. I make this solemn declaration conscientiously believing it to be true and knowing that is of the same force and effect as if made under oath by virtue of the Ontario Evidence Act and the Canada Evidence Act.

Signature _____ Date: _____
(mm/dd/yyyy)

4. Commissioner of Oaths or Notary Public

(Have a Notary Public or Commissioner of Oaths witness this declaration by signing below and affixing their notary seal or commissioner's stamp.)

Declared before me at _____ in the province or territory of _____.

Dated this _____ day of _____
(month, year)

Signature of Commissioner or Notary Public _____

Name of Commissioner or Notary Public (please print) _____



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- Send original to HOOPP
- Make a copy for your files