**Instructions for completing a statutory declaration**

*Please complete the following form using the notes in the left-hand margin for guidance. More guidance on making statutory declarations can be found at* [*www.justice.vic.gov.au*](http://www.justice.vic.gov.au)*.*

*When making the statutory declaration the declarant must say aloud:*

I*, [full name of person making declaration]* of *[address],* declare that the contents of this statutory declaration are true and correct.

Statutory Declaration

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| *Insert the name, address and occupation person making the statutory declaration.* | I, [ ], of [ ] and [ ] occupationmake the following statutory declaration under the **Oaths and Affirmations Act 2018:** |
| 1. I am the authorised representative for [insert applicant business legal name] with ABN [insert ABN Number] applying to the *Timber Supply Chain Resilience Program - Highly Impacted Manufacturers Stream, and*
2. On behalf of this business, I declare that it has been highly affected by the end of native timber harvesting in Victoria, with the following occurring in one completed financial year (either 2021-22 or 2022-23):
	* at least 40% of the business’s material inputs (measured by cost) used in the manufacturing process are derived from native hardwood sourced from Victorian state forests, or
	* at least 40% of the business’ revenue is derived from sales of products made from native Victorian hardwood.
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|  |  **I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.** |
| *Signature of person making the declaration* |  |
| *Place (City, town or suburb)**Date* | **Declared at** |  | **\*in the state of Victoria** |
| on  |
| *Signature of authorised statutory declaration witness**Date* | **I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration:**on |
| *Name, capacity in which authorised person has authority to witness statutory declaration, and address (writing, typing or stamp)* | A person authorised under section 30(2) of the **Oaths and Affirmations Act 2018** to witness the signing of a statutory declaration. |

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| *The witness must only sign this section if the person making the statutory declaration is illiterate, blind or cognitively impaired and the statutory declaration is read to them.**This section must be signed by any person who has assisted the person making the statutory declaration, for example by translating the document or reading it aloud. If no assistance was required, this section does not need to be completed.**Date**Name and address of person providing assistance* | **I certify that I read this statutory declaration to** *[name of the person making the statutory declaration]* at the time the statutory declaration was made.**Icertify that I have assisted** *[name of the declarant]* by *[insert assistance provided, for example translating the document*]. Signed:On:Name and address of person providing assistance: |