PARTNERSHIP ACT
DECLARATION OF PARTNERSHIP
FORM 1

1. NAME OF THE PARTNERSHIP

_____

2. NAMES AND ADDRESSES OF THE PARTNERS

_____ _____
(name) *(name)*

_____ _____

_____ _____
(complete postal and street address) *(complete postal and street address)*

_____ _____
(name) *(name)*

_____ _____

_____ _____
(complete postal and street address) *(complete postal and street address)*

IMPORTANT: If required ☐ Schedule of additional partners is attached

3. BUSINESS ADDRESS

_____

_____
(complete postal and street address)

4. DATE OF FORMATION OF THE PARTNERSHIP

_____ *(year, month, day)*

5. NATURE OF BUSINESS CARRIED ON BY THE PARTNERSHIP

_____
(nature or type of business)

WE HEREBY DECLARE THAT this declaration is made under section 45 of the *Partnership Act*, we are the only members of the partnership and the information set forth is true.
Dated this _____ day of _____, 20_____.

_____ _____
(signature of partner) *(signature of partner)*

_____ _____
(signature of partner) *(signature of partner)*