



DETAILS OF THE CLAIM

1. \*I/We seek an order for the following relief pursuant to the Divorce Act, 1985:
  - Divorce
  - Custody
  - Access
  - Child Support
  - Spousal Support
  - Costs
  
2. \*I/We also seek an order for the following relief pursuant to other legislation:
  - Matrimonial Property Act**
    - Exclusive possession of the matrimonial home
    - Division of property
    - Division of pension
    - Other (specify)
  
  - Pension Benefits Act** to enable a division of pension
  - Pension Benefits Standards Act, 1985** to enable a division of pension
  
  - Change of Name Act**
    - Change of Name of \*Petitioner to: \*
  
  - Other (specify)
  
3. \*I/We seek a divorce on the ground that there has been a permanent breakdown of the marriage, and in particular:
  - (I) The spouses have been living separate and apart since \*date and will have lived separate and apart for at least one (1) year immediately preceding the determination of the divorce.
  
  - (ii) \*[if adultery or cruelty is alleged, provide brief particulars, but do **not** name the person with whom it is alleged adultery has been committed]
  
4. There is no possibility of reconciliation.
  
5. There has been no collusion, condonation or connivance in relation to this Petition.



\*I/We say that the contents of this Petition are true to the best of \*my/our knowledge, information and belief.

DATED at \*, Nova Scotia, on \*[date].

\_\_\_\_\_  
Signature of Petitioner

\*Signature of Co-Petitioner

The Petition was issued on behalf of the Petitioner by \*his/her solicitor:

\*[name, firm name, address, telephone and fax number]

I, \* , the solicitor for the Petitioner, certify to this Court that I have complied with the requirements of s. 9 of the Divorce Act.

\_\_\_\_\_  
\*Signature of Solicitor

ISSUED at \*, Nova Scotia, on \*[date].

\_\_\_\_\_  
COURT OFFICER

**Acknowledgement of Service:**

I, \* , named as Respondent in this Petition have received a copy of this Petition on \*[ , ] and my mailing address for further service is:

\*street

\*town/city      \*province

\*postal code

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
Signature of Respondent