

# Gift Letter

To The Equitable Trust Company:

DATE: \_\_\_\_\_

This letter is to confirm that the undersigned is making a financial gift in the amount of:  
\$ \_\_\_\_\_

To (Print names of recipients): \_\_\_\_\_

For the use toward the purchase of the property located at:

Print address of property: \_\_\_\_\_

We, the undersigned recipients and donors, hereby certify that:

- These funds are a genuine gift from the donors and do not have to be repaid;
- No part of the financial gift is being provided by any third party having any direct or indirect interest in the subject property; and
- The donor(s) and recipient(s) are: immediate family member(s) of each other.  
(e.g. parent, grandparent or sibling)  
\*\*NOT immediate family member(s) of each other.

**\*\*NOTE: If funds are NOT from an IMMEDIATE family member(s), ETC requires:**

- 1. confirmation from the DONOR that the gift funds have been in the DONOR (S) possession for at least 90 days prior to the date of this Gift Letter. e.g. acceptable documents could include copies of the DONOR (S) bank statements or GIC and;**
- 2. completion of the attached *Schedule A, Gift Letter Third Party Determination Form.***

**Recipients:**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Donors:**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

**Recipients:**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Donors:**

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

**The Financial Institution and account number where the gift will be deposited is as follows:**

Bank Name: \_\_\_\_\_ Bank Address: \_\_\_\_\_

Transit #: \_\_\_\_\_

Account # \_\_\_\_\_ Date gift deposited (no later than) \_\_\_\_\_

**GIFT LETTER THIRD PARTY DETERMINATION FORM.**  
(to be completed if Gift is NOT from an **Immediate** family member)

**INFORMATION ABOUT THE THIRD PARTY:**

**Personal Information (if applicable):**

<b>Full Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>Province:</b>	
<b>Country:</b>	<b>Postal Code:</b>	
<b>Occupation:</b>		

**Business Information (if applicable)**

<b>Name of Business:</b>	<b>Nature of Business:</b>
<b>Incorporation Number and Place of Issue:</b>	
<b>Address:</b>	<b>City:</b>
<b>Country:</b>	<b>Postal Code:</b>

**What is the relationship between the registered owner of the Property on closing and the Third Party?**

**Agent**

**Borrower**

**Employee**

**Friend**

**Relative**

**Trustee**

**Power of Attorney**

**Other (specify) \_\_\_\_\_**

**SOURCE OF FUNDS DOCUMENTATION ATTACHED.**

**Note:** please attach confirmation from the DONOR that the gift funds have been in the DONOR (S) possession for at least 90 days prior to the date of this Gift Letter. e.g. by copies of DONOR (S) bank statements, GIC etc.