MUSQUEAM INDIAN BAND

Musqueam Land Code Registrations
Form No. 01B – Estate Transfer

APPROVED AS TO THE FORM BY THE MUSQUEAM INDIAN BAND PURSUANT TO THE MUSQUEAM LAND CODE
Signature:
Date:

VersionControl-NOV-2017

1. APPLICATION

Name of Applicant:

Date:
Phone No.:
Email Address:

2. PARCEL IDENTIFIER(S) AND LEGAL DESCRIPTION(S) OF LAND:

PIN(s)	Legal Description(s)	Plan No.(s)	Reserve Name & No.(s)

3. INSTRUMENT

☐ Estate Transfer
☐ Other:

4. Consideration

Dollar Value, if applicable: $

5. TRANSFEROR(S)

Name of the Deceased

☐ Musqueam Member
☐ CP or Allotment No.

6. TRANSFEREE(S)

Name(s)

Postal Address(es) and postal code(s)

☐ Musqueam Member(s)

☐ As Joint Tenants
☐ Tenants in Common, with a(n) interest

7. DECLARATION

By my signature below, I hereby make this solemn declaration, and acknowledge that any error or misrepresentation in this application or the information I provide could result in voiding this application for registration as well as resulting in other legal consequences. I declare that:

(1) The information contained in this application form is correct;
(2) I acknowledge that I have been advised to seek independent legal advice;
(3) I agree to comply with the Musqueam Land Code and am not aware of any conflict between the proposed registration and any provision of the Musqueam Land Code or related Musqueam Laws;
(4) I acknowledge that neither Musqueam Indian Band nor any Musqueam Councillor, employee or contractor involved in registering Interests, documents, instruments or transactions:
   (a) bears any responsibility for determining whether legal interests submitted for registration are in good standing or the terms have been complied with;
   (b) are responsible for ensuring the validity and accuracy of anything submitted for registration; or
   (c) shall, in any way, be responsible or liable for ensuring that a document or instrument which affects or purports to affect Musqueam Lands: (i) is validly made; (ii) complies with the Land Code; (iii) complies with the Federal Regulation; (iv) should be registered or recorded; or (v) will be accepted for registration or recording.

8. EXECUTION(S)

Officer Signature(s)	EXECUTION DATE			Transferor(s) Signature(s)
	YYYY	MM	DD	Executor(s) of the Estate of
_____	_____	_____	_____	_____
As to the signature(s)				

OFFICER CERTIFICATION: Your signature constitutes a representation that you are a solicitor, notary public or other person authorized by the *Evidence Act, R.S.B.C. 1996 c 124 to ta*ke affidavits for use in British Columbia and certifies that you have verified the identities of the signatories.