



# APPLICATION FOR THE TRANSFER OF JOINT TENANCY BY SURVIVORSHIP

Not applicable in the Province of Quebec (except for Akwesasne No. 15)

### Privacy Act Statement

This statement explains the purposes and use of your personal information. Only information needed to respond to program requirements will be requested. Collection and use of personal information is in accordance with the *Privacy Act*. In some cases, information may be disclosed without your consent pursuant to subsection 8(2) of the *Privacy Act*. The collection and use of your personal information is authorized by sections 21 and 55 of the *Indian Act* <http://laws-lois.justice.gc.ca/eng/acts/i-5/> and is required for your participation. We will use your personal information, your contact information, for the processing of the form. We share the personal information you give us with Bands (First Nation Governments) for whom INAC tracks this. The information collected is described in Personal Information Bank "Monitoring and Compliance of Reserve Land Instruments", INAC PPU 096, detailed at <http://www.aadnc-aandc.gc.ca/eng/1100100011039/1100100011040>, will be retained for a period of 30 years after the last administrative action and then transferred to Library and Archives Canada (LAC) as archival records. As stated in the *Privacy Act*, you have the right to access your personal information and request changes to incorrect information. Contact our office (toll-free) at 1-800-567-9604 to notify us about incorrect information. For more information on privacy issues and the *Privacy Act* in general, you can consult the Privacy Commissioner at 1 (800) 282-1376.

I/We \_\_\_\_\_

of Band No. \_\_\_\_\_, member(s) of the \_\_\_\_\_

First Nation registered in lawful possession as joint tenants of that certain parcel of land being: (Describe only land being transferred)

Do hereby make oath and say:

The said \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of died on or about \_\_\_\_\_

I/We \_\_\_\_\_ being entitled to the land by right of survivorship hereby apply to be the lawful

possessor of the lands described above.

In support of this application, I attach a Certified True Copy of the Death Certificate/Funeral Director Certificate.

In witness whereof I/We, have hereunto subscribed my/our name(s)

This \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_  
(Day) (Month) (Year)

Signed in the presence of:

\_\_\_\_\_  
Surviving Joint Tenant

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature



### AFFIDAVIT OF EXECUTION

CANADA ) I, \_\_\_\_\_  
 PROVINCE OF ) of the City of \_\_\_\_\_  
 ) in the Province/Territory of \_\_\_\_\_  
 )  
 TO WIT: ) make oath and say:

1. That I was personally present and did see the within instrument duly executed by: (Where execution by mark insert applicable clause)
2. That I know the said party(ies) and that the said party(ies) in my belief is/are the full age of \_\_\_\_\_ years
3. That I am the subscribing witness to the said instrument

\_\_\_\_\_  
 (Witness)

#### SWORN/AFFIRMED BEFORE ME

at \_\_\_\_\_ in the Province/Territory of \_\_\_\_\_

This \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_  
 (Day) (Month) (Year)

\_\_\_\_\_  
 A Notary Public/Commissioner for Oaths in and for the

in the Province/Territory of \_\_\_\_\_

My commission expires (YYYYMMDD): \_\_\_\_\_

#### Execution by Mark:

Where the transfer is signed by mark the following should be added to the attestation clause (Paragraph 1.) to be signed by the witness.

That the said transfer having first been truly and audibly read over to him/her, he/she appeared to understand it, and made his/her mark hereto in our presence as aforesaid.