



TZEACHTEN FIRST NATION

Tzeachten (TZFN) Lands Register
Form No. TZFN-01
(FORM AS OF OCTOBER 27, 2008)

FOR OFFICE USE ONLY:

APPROVED AS TO THE FORM BY THE
REGISTRAR OF LANDS PURSUANT TO
THE TZEACHTEN FIRST NATION
LAND CODE

Signature

Date

**TRANSFER OF INTEREST
(CERTIFICATE OF POSSESSION)**

1. APPLICATION:

Date	Phone No.
Name	MUST BE SIGNED BY Signature of Applicant, Applicant's Solicitor or Agent
Email Address	

2. PARCEL IDENTIFIER

PIN	Lot No.
Plan No.	Reserve Name & No.

3. CONSIDERATION

\$

4. TRANSFEROR(S)

Name	TZFN Membership No.
Name	TZFN Membership No.
Name	TZFN Membership No.
Name	TZFN Membership No.

5. TRANSFEREE(S)

Name	TZFN Membership No.	<input type="checkbox"/> As Joint Tenants <input type="checkbox"/> Tenants in Common – with an _____ interest
Name	TZFN Membership No.	<input type="checkbox"/> As Joint Tenants <input type="checkbox"/> Tenants in Common – with an _____ interest
Name	TZFN Membership No.	<input type="checkbox"/> As Joint Tenants <input type="checkbox"/> Tenants in Common – with an _____ interest
Name	TZFN Membership No.	<input type="checkbox"/> As Joint Tenants <input type="checkbox"/> Tenants in Common – with an _____ interest

6. ATTACHMENTS

Are the following documents attached?
 Proof of Membership Other (specify)

7. EXECUTIONS

The transferor(s) accept(s) the above consideration and understand(s) that this instrument operates to transfer the Allotment of Certificate of Possession in the land described in Item 2 to the transferee(s).

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

		Transferor

		Transferor

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 take affidavits for use in British Columbia and certifies that there has been compliance with the Tzeachten First Nation Land Code.