



METLAKATLA FIRST NATION
 First Nation Lands Registry
 System
 Form No. MFN-01
 (FORM AS OF FEBRUARY 28, 2017)

FOR OFFICE USE ONLY:

APPROVED AS TO THE FORM BY
 THE DIRECTOR OF LANDS
 PURSUANT TO THE METLAKATLA
 FIRST NATION LAND CODE

 SIGNATURE

 DATE

TRANSFER OF INTEREST (CERTIFICATE OF POSSESSION)

1. APPLICATION:			
Date:	Phone No.:		
Name of Applicant:	MUST BE SIGNED: Signature of Applicant, Applicant's Solicitor or Agent		
Email Address:			
2. PARCEL IDENTIFIER			
PIN	Legal Description		
Plan No.	Reserve Name & No.		
3. CONSIDERATION			
\$			
4. TRANSFEROR(S)			
Name			Membership No.
Name			Membership No.
Name			Membership No.
Name			Membership No.
5. TRANSFEREE(S)			
Name	Membership No.	<input type="checkbox"/>	As Joint Tenants
		<input type="checkbox"/>	Tenants in Common – with a(n) _____ interest
Name	Membership No.	<input type="checkbox"/>	As Joint Tenants
		<input type="checkbox"/>	Tenants in Common – with a(n) _____ interest
Name	Membership No.	<input type="checkbox"/>	As Joint Tenants
		<input type="checkbox"/>	Tenants in Common – with a(n) _____ interest
Name	Membership No.	<input type="checkbox"/>	As Joint Tenants
		<input type="checkbox"/>	Tenants in Common – with a(n) _____ interest
6. ATTACHMENTS/ INSTRUMENTS			
Are the following documents or instruments attached?			
Proof of Membership	Sale or Transfer Agreement	Joint Tenancy Agreement	Matrimonial or Spousal Agreement
Court Order	Other (specify) _____		
7. EXECUTIONS/ SIGNATURES			
The transferor(s) accept(s) the above consideration and understand(s) and agree(s) that this instrument operates to transfer the Allotment or Certificate of Possession for the land described in Item #2 to the transferee(s):			
Witness as to the Transferors	EXECUTION DATE	Transferor(s) Signature(s)	
	YYYY MM DD		
_____ As to the signature of the Transferor(s)	_____	_____ Transferor(s)	
_____ As to the signature of the Transferor(s)		_____ Transferor(s)	
Officer's Signature(s)		_____ Transferor(s)	
		_____ Transferor(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 take affidavits for use in British Columbia and certifies that you have confirmed the identifies and witnessed the signatures of the signatories