



RTTLT×FR



Application Sequence Number Application Sheet Count

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**Application for
Transfer
(Single Title)****Please make sure Authorizations are included.**Existing Title Number (if known) **OR** Application Sequence Number

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New Owners:☐ Single Owner ☐ Joint Tenants ☐ Joint Tenants with no survivorship**For each new owner complete one of Section A or B (Corporation must complete Section A)****Section A - New Owner(s) with Client Number(s)** **Note: Use Client Application form to amend Client Information.
Do NOT include in Packet.**Client Number(s) Client Name (First, Second, Third and Last **OR** Corporation Name)

Section B - New Owner(s) without Client Number(s)**Note: Will not create Corporation Number(s)**

Client Name: Last First Second Third Phone Number (include Area Code)

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Client Address City Province/State Country (if outside Canada) Postal/Zip Code

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E-mail Address Fax Number (include Area Code)

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Client Name: Last First Second Third Phone Number (include Area Code)

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Client Address City Province/State Country (if outside Canada) Postal/Zip Code

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E-mail Address Fax Number (include Area Code)

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New Title Value (New Title Value represents this title's share in the parcel)

Conditional Registration Date and Time

(DD-MMM-YYYY HH: MM: SS.NNN)

OR ☐ Free and Clear☐ No Conditions **OR****BUT** subject to Judgment Registry numbers

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