

WASAUSINK LANDS INC.  
APPLICATION FOR LESSOR'S CONSENT TO ASSIGNMENT

**PART A - NATURE OF APPLICATION (PLEASE CHECK ONE OF THE FOLLOWING)**

New Buyer(s) and/or Lessee(s)  Lease Transfer -  Adding Lessee(s)  Removing Lessee(s) i.e. Children, Spouse, Friend, etc.

Lot: \_\_\_\_\_ Plan #: \_\_\_\_\_ 911 Address: \_\_\_\_\_

Value of Cottage: (\$ \_\_\_\_\_) \_\_\_\_\_

**PLEASE CHECK TYPE OF TENANCY REQUESTING**

Joint Tenants  Tenants in Common  Single Tenancy

**FULL LEGAL NAME AND LEGAL ADDRESS OF NEW LESSEE(S)**

(PLEASE PRINT CLEARLY)

(Additional space in Part F for 3 or more Lessees)

Name of Applicant: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of Applicant

Signature of Applicant

**PART B - MORTGAGE**

(All mortgages are to be registered with Indigenous and Northern Affairs Canada)

Is there a mortgage being obtained :  YES or  NO

If Yes, please complete the following information:

Name of Mortgagee: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

Email Address: \_\_\_\_\_

1. The Buyer(s) will be required to provide Wasausink Lands Inc. with a copy of the **Original Mortgage** to be registered with Indigenous and Northern Affairs Canada.

2. It is the Seller(s) responsibility to submit an **Original Discharge of Mortgage** to Wasausink Lands Inc. to ensure the Seller(s) does not possess a mortgage registered with Indigenous and Northern Affairs Canada

**PART C - REFERENCES**

(Please provide two Financial References)

Name of Reference: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Name of Reference: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Please provide two Character References.

Name of Reference: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Name of Reference: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

1. Original References Required.

2. Financial References are to be on company letter head with **Original Signature** .

3. Character References are to be submitted with **Original Signature** .

4. Should the Buyer(s) financially operate jointly with one individual bank. The Buyer(s) are responsible to provide an additional financial reference i.e. financial advisors.

The Buyer(s) give WLI permission to contact the Chararter and Financial references provided.

YES  NO If No, please Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART D - PURCHASE OF SALE AGREEMENT**

WASAUSINK LANDS INC.  
APPLICATION FOR LESSOR'S CONSENT TO ASSIGNMENT

Please attach a copy of the ***Original Purchase of Sale Agreement*** and/or other such instrument representing the agreement for both parties to transfer the Assignment of Sublease. **(Wording is important)**

1. Wasausink Lands Inc. or Board of Directors in to not be referred to as Parry Island Band Council or Band Council in the Purchase of Sale Agreement.

2. Lessee(s) are required to be in Lease/Septic Compliance in order to proceed with their sale.

3. Leased Lots septic systems on Wasauksing First Nation (Parry Island) are inspected and meet Health Canada Guidelines, the Provincial Regulations and Wasausink Lands Inc. Regulations.

**PART E - ASSIGNOR(S) (SELLERS) SIGNATURE(S)**

Print Name: \_\_\_\_\_  
Signature of Assignor: \_\_\_\_\_  
Date: \_\_\_\_\_

Print Name: \_\_\_\_\_  
Signature of Assignor: \_\_\_\_\_  
Date: \_\_\_\_\_

Print Name: \_\_\_\_\_  
Signature of Assignor: \_\_\_\_\_  
Date: \_\_\_\_\_

Print Name: \_\_\_\_\_  
Signature of Assignor: \_\_\_\_\_  
Date: \_\_\_\_\_

**PART F - ADDITIONAL SPACE FOR FULL LEGAL NAME AND LEGAL ADDRESS OF NEW LESSEE(S)**

(PLEASE PRINT CLEARLY) (ONLY 3 OR MORE NEW ASSIGNEES)

Name of Applicant: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

**ADDITIONAL SPACE FOR FULL LEGAL NAME AND LEGAL ADDRESS OF NEW LESSEE(S)**

(PLEASE PRINT CLEARLY) (ONLY 3 OR MORE NEW ASSIGNEES)

Name of Applicant: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

**PART G - WASAUSINK LANDS INC., BOARD OF DIRECTORS APPROVAL  
(OFFICE USE ONLY)**

Seller(s): \_\_\_\_\_

Buyer(s): \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Moved by: \_\_\_\_\_ Second by: \_\_\_\_\_

Motion: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Carried Unanimously:

