

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.

CHECK TYPE OF TENANCY REQUEST

Joint Tenants

Tenants in Common

Single Tenancy

Value of Cottage and Wasausink Lands Inc. Leased Lot \$ _____

FULL LEGAL NAME AND LEGAL ADDRESS OF NEW LESSEE(S) (Additional space in Part F for 3 or more Lessees) (PLEASE PRINT CLEARLY)

Name of Applicant: _____

Name of Applicant: _____

Street Address: _____

Street Address: _____

City: _____ Province: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____

Postal Code: _____ Telephone: _____

Cell: _____ Email: _____

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: _____

Name of Reference: _____

Street Address: _____

Street Address: _____

City: _____ Province: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____

Postal Code: _____ Telephone: _____

Email: _____

Email: _____

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Please provide one and/or two Character References.

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

Please attach ac 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 Complianc e 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)**

LOT #: _____ PLAN #: _____	LOT #: _____ PLAN #: _____
Print Name: _____	Print Name: _____
Signature of Assignee: _____	Signature of Assignee: _____
Date: _____	Date: _____
LOT #: _____ PLAN #: _____	LOT #: _____ PLAN #: _____
Print Name: _____	Print Name: _____
Signature of Assignee: _____	Signature of Assignee: _____
Date: _____	Date: _____

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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: _____ Carried Unanimously: YES OR NO

Motion: _____

Date: _____