

Document General

IMPORTANT NOTICE

- I. It is a serious offence under the Criminal Code to make a false statement in this document.
- II. This document should be registered in the proper Land Registry Office.
- III. When registered this document is the property of the Land Registry Office.

INSTRUCTIONS FOR COMPLETION

- (1) **Registry/Land Titles** -- Mark "x" in the appropriate box.
- (2) **Pages** -- Enter the total number of pages of document, including this form.
- (3) **Property Identifier(s)** -- If identifier(s) has/have been assigned by the Land Registry Office, insert a maximum of two here. If the land affected by this document has more than two identifiers, enter two here and make the "Additional See Schedule" box with an "x" and attach schedule with remaining identifier(s).
- (4) **Nature of Document** -- This is a "Notice of Vesting / Statutory Declaration" under the *Municipal Tax Sales Act, 1990*.
- (5) **Consideration** -- This box is "Not Applicable".
- (6) **Description** -- Begin with parcel and section (Land Titles), part, lot or unit on plan or concession lot (e.g. Unit 13, Level 13, York Condominium Plan No. 25 or Part Lot 6, Concession 6). Include also the township, municipality, etc., if a metes and bounds description is required, mark "x" in box 7(b) and attach schedule with full description. If document divides an the existing property, enter "Property Division" beside the title "Description". If the property described is to be consolidated with adjoining property and its identification (i.e. Property Identifier Number, new heading under section 77 of the Registry Act, parcel and section for Land Titles properties) and the proposed description for the consolidated property..
- (7) **This Document Contains** -- Mark either box (a) or (b) with an "x" as required.
- (8) **This document provides as follows** -- A Notice of Vesting of land in the name of the municipality or board. Enter the assessment roll number of the property.
- (9) **This Document relates to instrument number(s)** -- Enter the instrument number assigned to the Tax Arrears Certificate.
- (10) **Party(ies)** -- Enter the full corporate name of the municipality or board, in capital letters. the treasurer or other authorized officer must sign in the space provided and enter the date of signature. Enter the date starting with the year, followed by the month and day.

For example,
THE CORPORATION OF THE Signature of Treasurer 91/09/28
TOWNSHIP OF RIVER
- (11) **Address for Service** -- Enter the full address, including postal code of the municipality or board.
- (12) **Party(ies)** -- This box is "Not Applicable".
- (13) **Address for Service** -- This box is "Not Applicable".
- (14) **Municipal Address of Property** -- Enter the full municipal address of property. State as follows: street number, suffix (e.g. "A: as in 29A), street name, unit type (apt., suite, etc.), unit number, municipality, postal code. If property dealt with has more than one municipal address, enter "MULTIPLE". If no municipal address assigned, enter "NOT ASSIGNED". Information entered does NOT affect the validity of this document.
- (15) **Document Prepared by** -- Enter full name and address including postal code.

FOR OFFICE
USE ONLY

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This document has been:

Registered/Received _____ Verified/Certified _____

Abstracted _____ Filmed _____

FOR OFFICE
USE ONLY

Duplicate for:

Name and Address: