



APPROVED AS TO THE FORM BY
 THE LANDS MANAGER PURSUANT
 TO THE SHUSWAP LAND CODE

Signature:

Date:

GENERAL INSTRUMENT - PART 1

(This area for Shuswap Lands Office use)

Page 1 of ____ Pages

1. APPLICATION:(Name, address, phone number and signature of applicant, applicant's solicitor or agent)

[NAME]
 [ADDRESS]
 Phone:

 Signature of Applicant, Applicant's Solicitor or Agent

2. PARCEL IDENTIFIER(S) AND LEGAL DESCRIPTION(S) OF LAND:

PIN	LEGAL DESCRIPTION
000000000	[UNIT] [LOT] [PLAN] [RESERVE NAME & NO.]

3. NATURE OF INTEREST: DESCRIPTION	DOCUMENT REFERENCE (page and paragraph)	PERSON ENTITLED TO INTEREST
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[TYPE OF INTEREST & REG NO.]

4. TERMS: Part 2 of this instrument consists of (select one only)

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Lease | <input type="checkbox"/> Agreement for Sale | <input type="checkbox"/> Licence |
| <input type="checkbox"/> Sublease | <input type="checkbox"/> Assignment of Mortgage | <input type="checkbox"/> Easement |
| <input type="checkbox"/> Assignment of Lease | <input type="checkbox"/> Discharge of Mortgage | <input type="checkbox"/> Release |
| <input type="checkbox"/> Assignment of Sublease | <input type="checkbox"/> Permit | <input type="checkbox"/> Other: _____ |

Part 2 includes any additional or modified terms referred to in Item 7 or in a schedule attached to this instrument. If discharge of mortgage or release is selected, the interest described in Item 3 is released or discharged from the land described in Item 2.

5. TRANSFEROR(S):

[NAME]
 [ADDRESS]

6. TRANSFEREE(S): including occupation(s), postal address(es) and postal code(s)

[NAME]
 [ADDRESS]

7. ADDITIONAL OR MODIFIED TERMS:

8. EXECUTION(S): This instrument creates, assigns, modifies, enlarges, discharges or governs the priority of the interest(s) described in Item 3 and the Transferor(s) and every other signatory agree to be bound by this instrument, and acknowledge(s) receipt of a true copy of the instrument described in Item 4.

Officer Signature(s)

EXECUTION DATE

Party(ies) Signature(s)

Y	M	D
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As to the signature(s)

0000	00	00
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Print Name:

Print Name:

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 there has been compliance with the Shuswap Land Code.