

PARKS

FEES: \$52.50

NO photocopies

PLEASE BE SURE TO READ THE ENTIRE DOCUMENT PRIOR TO COMPLETING.

SECTION A (1): PROPOSED LEASEHOLDERS

Must list full legal names (first, middle, last – no initials) - Go to A (2) if a Corporation

#1. Leaseholder Primary Contact (PRINT)

Mailing Address

Email Address

Home Number / Cell Number

Work Number

#2. Leaseholder Name (PRINT)

Mailing Address

Email Address

Home Number / Cell Number

Work Number

#3. Leaseholder Name (PRINT)

Mailing Address

Email Address

Home Number / Cell Number

Work Number

Are you over 18? Yes No

Proof of age: MB Driver's License or MB Health Card
(attach a photocopy of your license or health card with application)

Office Use Only: Proof of age verified by: _____

SECTION A (2): PROPOSED CORPORATE LEASEHOLDER

Registered Name

Mailing Address

Email Address

Home Number / Cell Number

Work Number

Authorized Signing Officers (please print name)

(Attach a Current Copy of Certificate of Status)

SECTION B: TENANCY

Please indicate the Parks Vacation Home Lease tenancy:

NOTE: SHOULD CLARIFICATION BE REQUIRED, PLEASE CONSULT WITH LEGAL COUNSEL.

JOINT TENANTS

TWO OR MORE PEOPLE, WHO EACH HOLD AN UNDIVIDED EQUAL INTEREST IN THE PROPERTY. AFTER DEATH, THE SURVIVING TENANT(S) ACQUIRE(S) THE DECEASED TENANT'S INTEREST.

TENANTS IN COMMON

TWO OR MORE PEOPLE, WHO EACH HOLD AN UNDIVIDED INTEREST IN THE PROPERTY. EACH TENANT MAY OCCUPY ALL THE LAND IN COMMON WITH THE OTHERS. EACH TENANT MAY DISPOSE OF THEIR INTEREST BY WILL OR DEED. THERE IS NO RIGHT OF SURVIVORSHIP.

INDIVIDUAL

CORPORATION
PROOF OF VALID ARTICLES OF INCORPORATION REQUIRED

OTHER:

SECTION C: LOCATION AND LEGAL DESCRIPTION OF LOT APPLYING FOR:

Lot No. _____ Block No. _____ Plan No. _____

Name of Subdivision: _____

FOR RES USE ONLY: (Application Fee: \$50.00+GST)

Amount Paid _____ MRO _____

Client # _____ Rev Code: _____

Parcel ID #: _____

Disposition Type & #: _____

Initial: _____

FOR CASHIER USE ONLY:

Rev Code:

C-50-1

SECTION D: SIGNATURES

I/We hereby certify that all information given in this application is true in substance and in fact.

NOTE: WITNESSES MUST BE A NOTARY PUBLIC OR A COMMISSIONER FOR OATHS.

NOTARY PUBLICS ARE TO STAMP/SEAL THEIR SIGNATURE and COMMISSION FOR OATHS TO PROVIDE THEIR COMMISSION EXPIRY DATE

Name of Leaseholder (PRINT / SIGN)	Date (YYYY / MM / DD)	Witness signature NOTARY PUBLIC / COMMISSIONER FOR OATHS NAME OF COMMISSIONER: _____ MY COMMISSION EXPIRES _____
Name of Leaseholder (PRINT / SIGN)	Date (YYYY / MM / DD)	Witness signature NOTARY PUBLIC / COMMISSIONER FOR OATHS NAME OF COMMISSIONER: _____ MY COMMISSION EXPIRES _____
Name of Leaseholder (PRINT / SIGN)	Date (YYYY / MM / DD)	Witness signature NOTARY PUBLIC / COMMISSIONER FOR OATHS NAME OF COMMISSIONER: _____ MY COMMISSION EXPIRES _____

SECTION E: LOT DEVELOPMENT FEE

Please make your cheque or money order payable to the Minister of Finance and submit with the Application.

	GST	Total
LOT DEVELOPMENT FEE	\$1,500.00\$0.00	\$1,500.00

BALANCE DUE.....\$1,500.00

FOR RES USE ONLY: (Lot Development Fee: \$1,500.00 no GST)

Amount Paid _____ MRO _____

Rev Code: _____

Client #: _____

Lot Block Plan: _____

Disposition Type & #: _____

FOR CASHIER USE ONLY:

Rev Code:

C-75-1

SECTION F: APPLICATION CHECKLIST

THE FOLLOWING MUST BE SUBMITTED WITH ALL APPLICATIONS:

- Application fee of \$52.50 (includes GST)
- Lot Development fee of \$1,500.00 (no GST)
- Application Addendum Declaration form for each proposed leaseholder
- Copy of Driver's License or Manitoba Health Card for each proposed leaseholder
- Copy of Current Copy of Certificate of Status, if applicable
- Email consent form (optional)

PERSONAL INFORMATION PROVISIONS

This personal information is being collected under the authority of *The Provincial Parks Act* and will be used for future communications and establishing a client account.

This information is protected by the privacy provisions of *The Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information, contact the Access and Privacy Coordinator, 17th Floor, 215 Garry Street, Winnipeg MB R3C 3Z1 Phone: 204-945-3881.