

**APPLICATION TO REGISTER
PLAN OF SUBDIVISION
(s. 76)**

TO THE REGISTRAR:

Applicant(s): _____
(*print full name of registered owner(s) and tenancy type shown on current
Certificate of Title*)

Mailing Address to be shown on title: _____

I/We are the owner(s) of the certificate of title for the land(s) described below and apply to register the attached plan of subdivision for these land(s):

Current Legal Description(s):

New Legal Description(s):

I/We request that you

- (a) cancel the certificate(s) of title number(s): _____ (or attach list);
- (b) issue a new certificate of title for each parcel shown on the plan of subdivision in the name of the owner(s) named on the current certificate of title(s); and
- (c) if the lands are located in any municipality issue a certificate of title for each road and public use parcel shown on the plan of subdivision in the name of the municipality in which the lands are located; or
- (d) if the lands are not located in any municipality, issue a certificate of title for each road and public use parcel shown on the plan of subdivision in the name of Commissioner, unless the approving authority has made a request under s. 68(2) or 76(3) of the Act, a copy of which is attached.

Mailing Address to be shown on road or public use parcel title of Municipality or Commissioner (if applicable):

Land Titles Act, 2015 — YUKON LAND REGISTRATION DISTRICT

If there are any active encumbrance(s) on the current certificate(s) of title for the land(s) described above, the written approval of each encumbrancee is attached in accordance with s.77(1)(b)(iii) of the Act.

If there are any easements shown on the plan, the instrument number of the Easement Agreement that has been registered in the Land Titles Office in regards to each easement shall be noted on the plan or a signed copy of the Easement Agreement shall be attached hereto for registration with the plan.

If this Application has been signed by an agent, the agent warrants that he or she has the authority to sign.

SWORN / AFFIRMED BEFORE ME)
at _____ in _____)
on the ____ day of _____, 20____) *(Signature of Applicant or Agent)*
)
)
)
) *(print full name of Applicant or Agent)*
)
)
)
) *(Signature of Applicant)*
Notary Public in and for Yukon;) (if more than one)
or Notary Public or Commissioner for Oaths)
in and for _____)
(My commission expires: _____)) *(print full name of Applicant)*

*** All Notaries and Commissioners outside of Yukon must affix seal**