

Application for Assignment of Agriculture Dispositions
Farm Development Lease (FDL), Grazing Licence (FGL), Grazing Lease (GRL)
& Associated Licence of Occupation (DLO)

ADDITIONAL ASSIGNEES

This document must be submitted together with the Application for Assignment of Agriculture Dispositions for the disposition(s) listed below:

Disposition Number:	Associated Access (DLO), if any
1.	
2.	
3.	
4.	

THE ADDITIONAL ASSIGNEES
5.
6.
7.
8.
9.
10.

Identification of Additional Assignees		
5. Assignee's Full legal name	Assignee's Client ID	
Assignee's Contact Information:		
Address:	City:	Prov.:
Postal Code:	Phone:	Email:

If the Assignee is incorporated, attach a copy of your certificate of incorporation or evidence of corporate status. Attached? <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the Assignee at least 18 years old?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the Assignee a Canadian Citizen or a permanent resident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the Assignee an employee of the Government of Alberta, (excluding AHS employees) or a Member of the Legislative Assembly of Alberta? If yes, which Department/Riding?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

This section is MANDATORY if the assignor has held the disposition for less than three years, and the assignee fits one of the relationships listed, per s.156 of the Public Lands Administration Regulation.

My relationship to the assignor is:

- | | | | | |
|-------------------------------------|--|---------------------------------|--|--|
| <input type="checkbox"/> Husband | <input type="checkbox"/> Wife | <input type="checkbox"/> Son | <input type="checkbox"/> Daughter | <input type="checkbox"/> Father |
| <input type="checkbox"/> Mother | <input type="checkbox"/> Brother | <input type="checkbox"/> Sister | <input type="checkbox"/> Father-in-Law | <input type="checkbox"/> mother-in-Law |
| <input type="checkbox"/> Son-in-Law | <input type="checkbox"/> Daughter-in-Law | <input type="checkbox"/> Nephew | <input type="checkbox"/> Niece | <input type="checkbox"/> Other: |

6. Assignee's Full Legal Name:	Assignee's Client ID:

Assignee's Contact Information:

Address:	City:	Prov.:
Postal Code:	Phone:	Email:

If the Assignee is incorporated, attach a copy of your certificate of incorporation or evidence of corporate status. Attached? <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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| <input type="checkbox"/> Son-in-Law | <input type="checkbox"/> Daughter-in-Law | <input type="checkbox"/> Nephew | <input type="checkbox"/> Niece | <input type="checkbox"/> Other: |

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8. Assignee's Full Legal Name	Assignee's Client ID:

Assignee's Contact Information:

Address:	City:	Prov.:
Postal Code:	Phone:	Email:

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Assignee's Contact Information:

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10. Assignee's Full Legal Name	Assignee's Client ID:

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| <input type="checkbox"/> Son-in-Law | <input type="checkbox"/> Daughter-in-Law | <input type="checkbox"/> Nephew | <input type="checkbox"/> Niece | <input type="checkbox"/> Other: |

SIGNATURES

Authorized Signatures

Each of the Assignee(s) certifies that the information in Part II is true and complete and agrees to comply with all terms and conditions.

Assignees' Name	Assignees' Signature
5.	
6.	
7.	
8.	
9.	
10.	

Dated:

COMMISSIONED/NOTARIZED

I, _____ (the applicant, being either an assignor or an assignee) solemnly declare that all information and statements provided in this application are true, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath or affirmation.

Signature of Applicant

Declared before me at _____
in the Province of Alberta this _____ day of
_____ 20_____.

A commissioner of Oaths in and for Alberta

Stamped name of Commissioner for Oaths and date on which appointment expires