

**LAND TITLE ACT  
FORM 17**

Province of  
British Columbia

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

JOHN JAMES SMITH  
1234 PINE STREET  
PO BOX 567  
KAMLOOPS, BC V2V 2V2  
  
250-555-5555

*J J SMITH*

SIGNATURE

2. (a) PARCEL IDENTIFIER(S) AND LEGAL DESCRIPTION(S) OF LAND: \*  
(PID) (LEGAL DESCRIPTION)

000-000-000

LOT 1 DISTRICT LOT 12 SECTION 123  
KAMLOOPS DIVISION YALE DISTRICT PLAN  
KAP123456

(B) MARKET VALUE: \$           n/a            
(IF FEE SIMPLE)

3. NATURE OF INTEREST:

**Transmission to Surviving Joint Tenant**

4. FULL NAME, ADDRESS AND OCCUPATION OF PERSON(S) ENTITLED TO BE REGISTERED:\*

JOHN JAMES SMITH  
1234 PINE STREET  
PO BOX 567  
KAMLOOPS, BC V2V 2V2

RETIRED

\*NOTE: Before submitting this application for registration applicants should check and satisfy themselves as to the tax position, including taxes of the crown provincial, a municipality and improvement, water and irrigation districts.