

Municipal District of
Big Lakes

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Email: biglakes@mdbiglakes.ca Website: www.biglakes.ab.ca

CHANGE ADDRESS

ADD PURCHASER

REASON (S) FOR CHANGES

TITLE TRANSFER

ADDITIONAL TITLEHOLDER

AGREEMENT FOR SALE

SALE IN PROGRESS

OTHER _____

SUB SYSTEM	ROLL NUMBERS	N/A NUMBER	LEGAL DESCRIPTION

CLIENT INFORMATION:

NAME (Last, First, Initial)		
ADDRESS (First Line Optional)		
STREET OR BOX NUMBER:		
CITY TOWN	PROVINCE	POSTAL CODE
SPOUSE::	PHONE NUMBER:	

 CLIENT SIGNATURE

 DATE

OFFICE INFORMATION:

FORM COMPLETED BY:	DATE	INFORMATION INPUT BY:	DATE
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