



REQUEST FOR COMMERCIAL TITLE INSURANCE
FOR FIRST NATIONS LAND - LEASEHOLD

To:	FCT	Date:	
Attention:	Commercial Title Insurance Services	Tel:	905.287.3112 / 1.866.804.3112
		Fax:	905.287.1009 / 1.866.566.8599
Your File No.		Email:	commercialsolutions@fct.ca

LAW FIRM INFORMATION:

ACTING FOR THE LESSEE/BORROWER:

Solicitor: Contact:

Law Firm:

Address: (new customers only)

Email Address:

Telephone Number: () Fax Number: ()

OTHER LAWYERS INVOLVED IN THE TRANSACTION (i.e. lender’s lawyer):

Solicitor: Contact:

Law Firm:

Address:

Email Address:

Telephone Number: () Fax Number: ()

Invoicing Party: Lessee/Borrower’s Solicitor Lender’s Solicitor

POLICIES REQUIRED

Loan Policy Owner’s Policy* FCT Reference # (if we provided you with a quote)

TRANSACTION INFORMATION

Closing Date: M M / D D / Y Y Y Y Purchase Price: \$

Property Lease* Property Lease and Mortgage* Share Purchase Cannabis Deal

Energy Deal New Mortgage/Refinance CMHC Insured, Number of Units (if CMHC insured)

Interest Held: Fee Simple Leasehold** Easement

Property Type: Apartment Building Bed and Breakfast Church Gas Station/Garage Hotel/Motel

Industrial Building Office Building Restaurant/Bar Condo Retirement Home

Trailer Park Medical Practice Educational Facility Salon/Aesthetics

Mixed Use (commercial with residential) Retail First Nations Land

Vacant Agricultural Land (income generating) *** Agricultural Land (income generating) with Residential Home

Vacant Land (non-farm)*** Other (please specify)

Would you like to add the Deal Protection coverage? (additional premium applies) Yes No

Has an order for this transaction previously been placed with another title insurer? Yes No

May we contact any additional lawyer/notary involved in this transaction? Yes No

* For corporations only, please provide the Corporate Profile Report when requesting an Owner’s Policy. For non-corporate entities, please provide documentation confirming legal existence.

*** If Leasehold, please provide name of Landlord and Lease registration particulars

Please provide term of lease

***If Vacant, please provide Corporate Profile of Purchaser/Borrower and Vendor

PROPERTY INFORMATION

Municipal Address:

Legal vehicular and pedestrian access to the property is via: or Unknown



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Legal Description: _____

Is the property contiguous? ☐ Yes ☐ No If no, please provide details: _____

Does the legal description describe the same property as that identified by the assessment roll number? ☐ Yes ☐ No

Additional properties (attach schedule if necessary):

Municipal Address: _____

Legal vehicular and pedestrian access to the property is via: _____ or ☐ Unknown

Legal Description: _____

Is the property contiguous? ☐ Yes ☐ No If no, please provide details: _____

Does the legal description describe the same property as that identified by the assessment roll number? ☐ Yes ☐ No

LESSEE/MORTGAGOR INFORMATION

Lessee/Mortgagor Name: _____

Address for Service: _____

Beneficial Owner (if applicable): _____

Are you acting for the Lessee/Mortgagor? ☐ Yes ☐ No

If Purchaser/Mortgagor is a Corporation has a notice of change been filed within the past 12 months that changes the Officers, Directors or Shareholders?

☐ Yes* ☐ No

*If yes please provide copy of Notice of Change and Corporate Profile.

AGENCY AGREEMENT (Complete when requesting an Owner’s policy where the purchaser is an individual)

Do you (the ordering lawyer/notary or authorized individual acting on behalf of the ordering lawyer/notary and your firm representing the purchaser), consent to act as agent for FCT, for the purposes of verifying each purchaser’s identity in accordance with the requirements under the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act* and its associated Regulations and the terms of the FCT Agency Agreement available at fct.ca/agency-agreement ? ☐ Yes ☐ No*

*Please provide the email address for each purchaser in the section below and advise they will receive an email from fctresidentialnoreply@fct.ca with instructions to complete identity verification through Bluink’s eID-ME app. Verification must be completed prior to issuing the owner’s policy.

Person 1:
Complete when requesting an Owner’s Policy where the purchaser is an individual and you are acting as agent:

First Name: _____ Last Name: _____

Date of Birth: (MM/DD/YYYY) _____

Address on ID / Current Address:

Unit No. _____ Street No. _____

Street Name _____

City _____

Province/State _____ Postal/Zip Code _____

Country _____

ID Document Details:

ID Verification Date (MM/DD/YYYY) _____

ID Expiry Date (MM/DD/YYYY) _____

ID Number _____

ID Country _____ ID Province/State _____

ID Verification Type: - Click to select a type -

Complete 2 verification categories when using the Dual-process method:

Name and Date of Birth	- Click to choose a document type -	Document No.	Document Source Name
Name and Address	- Click to choose a document type -	Document No.	Document Source Name
Name and Confirmation of Financial Account	- Click to choose a document type -	Document No.	Document Source Name

Complete when requesting an Owner’s Policy where the purchaser is an individual and you are not acting as agent

Email: _____
Phone: _____

Subject to certain exceptions, commercial title insurance policies equal or below \$10M CAD are provided by **FCT Insurance Company Ltd.** Commercial title insurance policies above \$10M CAD are provided by **First American Title Insurance Company**. Reference should be made to policy documents to confirm the insurer on any individual transaction. Services by **First Canadian Title Company Limited**. The services company does not provide insurance products. This material is intended to provide general information only. For specific coverage and exclusions, refer to the applicable policy. Copies are available upon request. Some products/services may vary by province. Prices and products/services offered are subject to change without notice.



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Person 2:

Complete when requesting an Owner’s Policy where the purchaser is an individual and you are acting as agent:

First Name: _____ Last Name: _____

Date of Birth: (MM/DD/YYYY) _____

Address on ID / Current Address: _____

Unit No. _____ Street No. _____

Street Name _____

City _____

Province/State _____ Postal/Zip Code _____

Country _____

ID Document Details:

ID Verification Date (MM/DD/YYYY) _____

ID Expiry Date (MM/DD/YYYY) _____

ID Number _____

ID Country _____ ID Province/State _____

ID Verification Type: - Click to select a type –

Complete 2 verification categories when using the Dual-process method:

Name and Date of Birth	- Click to choose a document type -	Document No.	Document Source Name
Name and Address	- Click to choose a document type -	Document No.	Document Source Name
Name and Confirmation of Financial Account	- Click to choose a document type -	Document No.	Document Source Name

Complete when requesting an Owner’s Policy where the purchaser is an individual and you are not acting as agent

Email: _____

Phone: _____

MORTGAGE INFORMATION (If an additional mortgage is to be insured, provide the same details in a schedule)

Mortgagee: _____

Custodian (if applicable): _____

Address for service: _____

Mortgage Amount: \$ _____ Insured Amount: \$ _____ Mortgage Reference No. _____

Loan to value is 75% or less: Yes ☐ No ☐

Priority: ☐ 1st ☐ 2nd ☐ 3rd Other _____

Would you like to add the extended Super Priority Liens coverage? (additional premium applies) ☐ Yes ☐ No

Would you like to add the Post-Policy Date - Encroachments, Restrictions & Work Orders coverage? (additional premium applies) ☐ Yes ☐ No

Does the Loan Agreement allow for the following? ☐ Construction Advances ☐ Subsequent Advances up to Amount of Insurance

☐ Subsequent Advances exceeding Amount of Insurance ☐ Revolving Credit Facility ☐ Variable Rate of Interest

LEASEHOLD TRANSACTIONS

1. If a Real Property Report is available, does it reveal any defects? ☐ Yes* ☐ No ☐ Unavailable

*If Yes, please provide the details: _____

Has a Survey or Plan showing the dimensions and extent of the land to be insured and the location of buildings, improvements and facilities thereon been obtained. (Please provide a copy) ☐ Yes ☐ No

Does a physical inspection of the property reveal persons in possession or using any portion of the land? (e.g. unregistered lease or driveways servicing other lands) ☐ Yes* ☐ No (*If Yes, please provide the details)

2. Please provide the name and phone number of the Real Estate Agent involved in this transaction. Company/Agent Name: _____
Telephone Number: (____) _____

☐ No Agent (please send a copy of the Agreement of Purchase and Sale/Lease and title along with your order request.)

3. Was any portion of the deposit paid directly to the vendor/landlord/landlord? ☐ Yes** ☐ No
(Do not answer “Yes” if the deposit was paid to the vendor/landlord’s/landlord’s solicitor and is retained in his trust account)

4. Have there been any Amendments with respect to the purchase price and/or deposit after the date of signing the Agreement to Lease, which exceed the sum of \$30,000.00? ☐ Yes** ☐ No

5. Is there a mortgage on title that will be paid out with the sale proceeds? ☐ Yes ☐ No
a. Is the mortgage to be paid out held by a private lender? ☐ Yes ☐ No
b. Will you have the discharge available on closing? ☐ Yes ☐ No



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6. Are the net mortgage proceeds (after payments to any secured or unsecured creditor for which there is evidence of a debt) being paid by Vendor's/Landlord's counsel to all registered owners? ☐ Yes ☐ No* ☐ No Net Proceeds
7. Are any Vendor's/Landlord's signing by way of Power of Attorney? ☐ Yes** ☐ No
8. Have there been any transfers of title/conveyances or discharges of mortgages registered within the last 6 months? ☐ Yes** ☐ No
(Please ensure you obtain the current Historical Title)
9. If the property is a condo, does the estoppel certificate indicate any adverse matters that will not be clear on closing? ☐ Yes*☐ No ☐ Unknown
10. Name of Vendor/Landlord's Solicitor: _____ Phone number: _____

MORTGAGE ONLY TRANSACTIONS (not in conjunction with the Lease)

1. Are any of the borrowers signing by way of Power of Attorney? ☐ Yes** ☐ No
2. Will a portion of the proceeds be used to pay out all existing mortgages? ☐ Yes ☐ No
a. Is the mortgage to be paid out held by a private lender? ☐ Yes ☐ No
b. Will you have the discharge available on closing? ☐ Yes ☐ No
3. Are the net mortgage proceeds (after payments to any secured or unsecured creditor for which there is evidence of a debt) being paid by lender's or borrower's counsel to all registered owners? ☐ Yes ☐ No* ☐ No Net Proceeds
4. Have any transfers of title/conveyances or discharges of mortgage been registered within the last 6 months, including transfers of title registered immediately prior to this mortgage? ☐ Yes** ☐ No*
(Please ensure you obtain the current Historical Title)

****Please provide an explanation if applicable and attach pertinent documentation to this order (e.g. Title Search, Real Property Report, Encroachment Agreement, Estoppel Certificate, Direction re Funds, Statement of Adjustments)***

*****Please attach the Agreement of Purchase and Sale with all amendments, Title Search and Power of Attorney, as applicable)***

***We may require additional information or clarification in order to issue a policy on First Nations Land. This will allow us to provide the best coverage possible by providing additional endorsements.

SEARCH AND OFF TITLE INFORMATION

A. Designated Land

1. Confirmation that an Order-In Council has been issued by the Governor General of Canada accepting a designation pursuant to Section 38 of the Indian Act (the "Designation", "Designated Land)". If so, please provide a copy of the Order-In Council. Yes No
2. Confirmation that you have reviewed the head lease granted by the Crown to the special purpose entity ("Bandco) formed by the Band for the purpose of holding title to the Designated Land. ☐ Yes ☐ No
3. Does the head lease conform with the terms and limitations of the Designation and the Order-in-Council ☐ Yes ☐ No
4. Does the sublease from Bandco to the proposed insured conform with the terms and limitations of the Order-in Council and the head lease. In particular the intended use of the property conforms with uses permitted under:
a) The order in Council; and b) the head lease ☐ Yes ☐ No

B. Land Code/Constitution – The provisions of the Land Code or Constitution must be reviewed in detail

1. Is the Land Code or Constitution in place ☐ Yes ☐ No
2. Where the interest is granted by a Band member, the head lease was approved and granted in compliance with the terms of the Land Code or Constitution ☐ Yes ☐ No
3. Where the interest is granted by the Bandco the head lease was approved and granted in compliance with the terms of the Land Code or Constitution ☐ Yes ☐ No

C. Locatee Land/Allotted Land

1. The band member is in possession of the land pursuant to a certificate of possession, certificate of occupation, notice of entitlement, location ticket granted by the Crown or the Band (whichever is applicable will depend which statutory framework the land falls within). ☐ Yes ☐ No
2. The above interest in 1. has been registered in the applicable Register. Please confirm that you have undertaken an up to date search to confirm title as mentioned in C 1. Above ☐ Yes ☐ No
3. All necessary approvals have been obtained in order for the Band member to grant an interest in the land including the following, if applicable: Crown approval and/or Bandco Approval. ☐ Yes ☐ No

Applicable to all matters:

1. Will taxes be paid up to date on closing? ☐ Yes ☐ No ☐ Unknown
2. To the extent utilities form a lien, will they be paid up to date on closing? ☐ Yes ☐ No ☐ Unknown
3. Are there any unregistered commercial leases or agreements to lease? ☐ Yes ☐ No ☐ Unknown
4. Does the intended use comply with the Designation, Land Code or Constitution (if applicable) ☐ Yes ☐ No



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5. Have Certificates of Corporate Status with respect to Bandco, Sublessee and/or Developer been obtained. **Please provide copies** ☐ Yes ☐ No
6. Have all requisite consents under the terms of the head lease and sublease been obtained with respect to: (a) the granting of the sublease?
(b) the mortgage of the sublease? ☐ Yes ☐ No
7. Are there any known disputes or controversy within the Band or elsewhere which could conceivably develop into litigation or other challenges to the validity of the interest to be granted or mortgaged? **Please obtain an Affidavit from an officer of the Band Council that there are no such disputes or controversy.** ☐ Yes ☐ No
8. Confirmation that Estoppel certificates from the Crown and from Bandco re the status of the head lease have been obtained and that the certificates do not disclose any adverse matters. **Please provide copies**
9. Has a zoning compliance certificate from the Band Council or other competent authority been obtained. **Please provide a copy** ☐ Yes ☐ No ☐ Unknown
10. Confirm location of access roads and, where applicable, evidence that all rights of way and easements appurtenant to the land are in place.
☐ Yes ☐ No ☐ Unknown
11. List details of all registered instruments or other matters affecting the property (or attach the title search), including but not limited to easements, restrictive covenants, development agreements, etc.

Instrument Type	Instrument Number	Registration Date
		MM / DD / YYYY
		MM / DD / YYYY
		MM / DD / YYYY

12. Have all agreements, restrictive covenants and conditions been complied with? ☐ Yes* ☐ No
If no, please provide details:
- If yes, please provide evidence
13. List any other matters that would normally qualify your opinion (including but not limited to title matters, judgments, liens, etc.):

STATEMENTS

Please review the following statements prior to submitting your request. If you are unable to confirm the following statements, please provide additional details when submitting your request, or alternatively, contact our office for instructions.

1.

I will obtain a corporate profile dated no more than 30 days prior to the Date of Policy showing an active status for the borrower and/or vendor/landlord and predecessor to vendor/landlord, if applicable; and

2.

Where the transaction relates to a purchase of a condominium, I will obtain a clear status/estoppel certificate dated no more than 30 days prior to the Date of Policy.

3.

I confirm that I have obtained consent from the parties to the transaction (purchasers, vendors, borrowers, lenders, as applicable) in compliance with all applicable laws to have their personal information provided to FCT for the purposes of issuing and administering a title insurance policy, and any other ancillary policy relating thereto, including for underwriting purposes and assessing and controlling risks. For FCT’s corporate Privacy Policy, including information about service providers located outside of Canada, visit our website at [www.fct.ca](#).

FCT is committed to protecting your client’s privacy and personal information. The personal information you provide is kept confidential and is used to underwrite, assess and control risks, and issue and administer policies of title insurance. For our complete corporate Privacy Policy, please visit our website at [www.fct.ca](#).