



To: FCT
Attention: Commercial Solutions

Date: _____
Tel: 514.744.8962 / 1.866.744.8962
Fax: 514.744.8143 / 1.800.381.8882
Email: commercial.qc@fct.ca

Your File No. _____

LAW FIRM INFORMATION

Notary's or Lawyer's name: _____

Contact: _____

Name of the Firm: _____

Address: _____

Telephone Number: (_____) _____ Fax Number: (_____) _____

Email : _____

POLICIES REQUIRED

Hypothecary Loan Policy ☐ Proprietor's Policy ☐

Language: French ☐ English ☐

FCT Reference # _____ (if we provided you with a quote)

TRANSACTION INFORMATION (PLEASE CHECK ALL BOXES THAT APPLY.)

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

☐ Property Purchase*
☐ Energy Deal
☐ CMHC Insured, Number of Units (if CMHC insured): _____

☐ Property Purchase and Hypothec*
☐ New Hypothec / Hypothec Refinancing
☐ Right of Ownership
☐ Right of Emphyteusis**
☐ Bed and Breakfast
☐ Office Building
☐ Medical Practice
☐ Mixed Use (commercial with residential)
☐ Vacant Farm Land (income generating)***
☐ Vacant Land (non-farm)***

☐ Share Purchase
☐ Construction Hypothecary Loan
☐ Superficiary Ownership**
☐ Church
☐ Restaurant/Bar
☐ Educational Facility
☐ Retail
☐ Farm Land (income generating) with Residential Home
☐ Other (please specify) _____

☐ Cannabis Deal
☐ Condominium
☐ Retirement Home
☐ Salon/Aesthetics
☐ First Nations Land

Interest Held:

☐ Right of Ownership
☐ Right of Emphyteusis**
☐ Superficiary Ownership**
☐ Other: _____

Property Type:

☐ Apartment Building
☐ Industrial Building
☐ Trailer Park
☐ Mixed Use (commercial with residential)
☐ Vacant Farm Land (income generating)***
☐ Vacant Land (non-farm)***

☐ Gas Station/Garage
☐ Condominium
☐ Retirement Home
☐ Salon/Aesthetics
☐ First Nations Land

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: _____

Year of Construction of the Insured Property: _____

Is the property under construction / renovation? ☐ Yes ☐ No

Date of work completion for a new construction or renovation: _____

Legal Description (If the legal description consists of a part of lot, please provide us with a copy in a Word format by Email):
*if more than one property, please provide the legal description for each one

Land Registry Office: _____



PURCHASER/BORROWER INFORMATION

Purchaser / Borrower: _____

Borrower (if different from purchaser): _____

Are you acting for the Purchaser / Borrower ? ☐ Yes ☐ No

If borrower 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. Identity 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: _____

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: _____

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.

HYPOTHEC INFORMATION (If an additional hypothec is to be insured, provide the same details in the Additional Information section.)

Lender: _____

Address: _____

“Fondé de pouvoir” (if applicable): _____

Amount of Hypothec: \$_____ Hypothec Reference No.: _____

Loan to Value is 75% or less: ☐ Yes ☐ No ☐ Unknown

Rank: ☐ 1st ☐ 2nd ☐ 3rd ☐ Other: _____ Are you acting for the Lender? ☐ Yes ☐ No*

*If No, please provide Lender Notary’s or Lawyer’s Name: _____ Telephone Number: (_____) _____

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 hypothec allow for: ☐ Construction advances ☐ Subsequent Advances up to amount of Hypothec

☐ Subsequent Advances exceeding amount of Hypothec

PURCHASE TRANSACTION INFORMATION

(Where an * asterisk appears, please provide details and attach the documentation for our review)

1. Please provide the name and phone number of the Real Estate Agent involved in this transaction.
(Please send a copy of the Offer to Purchase and Sale and Index of Immoveable.)
Agent’s Name: _____ Telephone Number: (_____) _____
☐ No Agent (Please send a copy of the Offer to Purchase and Sale and Index of Immoveable.)

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

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

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

5. If the hypothec on title is held by a private lender will you have the discharge available on closing? ☐ Yes ☐ No

6. Are the net hypothec proceeds (after payments to any secured or unsecured creditor for which there is evidence of a debt) being paid by lender’s borrower’s or vendor’s counsel to all registered owners? ☐ Yes ☐ No* ☐ No Net Proceeds

7. Are any Vendors signing by way of Power of Attorney? ☐ Yes* ☐ No

8. Have there been any transfers of title/conveyances or discharges of hypothecs registered within the last 6 months? ☐ Yes* ☐ No

HYPOTHEC TRANSACTION INFORMATION

(Where an * asterisk appears, please provide details and attach the documentation for our review)

1. Are any of the borrowers signing by way of Power of Attorney? ☐ Yes* ☐ No

2. If the hypothec on title is held by a private lender will you have the discharge available on closing? ☐ Yes ☐ No

3. Are the net hypothec 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 there been any transfers of title / conveyances or discharges of hypothecs registered within the last 6 months? ☐ Yes* ☐ No

5. Will a portion of the proceeds be used to pay out all existing hypothecs? ☐ Yes ☐ No ☐ No Existing Hypothec
a. Is the hypothec to be paid out held by a private lender? ☐ Yes ☐ No
b. Will you have the discharge available on closing? ☐ Yes ☐ No

SEARCH AND OFF TITLE INFORMATION

1.	All existing hypothecs will be discharged (if needed, use the Additional Information section of the form)	☐ Yes ☐ No* ☐ N/A
**Lender (staying on title): _____		Publication No: _____
Date of Publication: <u>MM/DD/YYYY</u>		Original Principal Amount: \$_____ Rank: ☐ 1 st ☐ 2 nd ☐ 3 rd
2.	Will taxes be paid up to date on closing?	☐ Yes ☐ No ☐ Unknown



3.

Details of all servitudes, other real rights, registered leases, declaration of Co-Ownership, work orders and other charges

Description*

Publication Number

Publication Date

* for a servitude please indicate if in favour, against or reciprocal

4.

Certificate of Location Information :

Is there a certificate of location?

☐ Yes

☐ No

Date of certificate of location:

Does the certificate of location disclose any irregularity?

☐ Yes

☐ No

If Yes, please provide details and provide us with copy of certificate of location by Email or fax :

If No, does it actually reflect the Insured Property?

☐ Yes

☐ No

If No, do you know if any modifications have been made on the Insured Property since the certificate of location?

☐ Yes

☐ No

If Yes, please provide details :

5.

Pursuant to your title searches, are there any irregularities ?

☐ Yes

☐ No

If Yes, please provide details :

ADDITIONAL INFORMATION / DETAILS

DECLARATIONS

I am a Notary / Lawyer in good standing, and have investigated title to the property insured by this policy in accordance with recognize practice or in accordance with lender instructions or in accordance with the underwriting guidelines of FCT Insurance Company Ltd. and First American Title Insurance Company (the “Company”), and I confirm the following:

1.

I will comply prior to funding with any and all requirements of the hypothecary lender as set out in its instructions to solicitor;
2.

I have disclosed all title matters discovered in the title search;
3.

I will advise the Company of any additional registrations or material changes to the state of title or the priority of the insured’s interest, prior to closing, if applicable;
4.

I will make the net proceeds of the loan payable to the registered owner of the property (applicable to hypothec only transactions);
5.

On or before closing, I will obtain a corporate profile showing an active status for the borrower and/or vendor, if applicable;
6.

To the extent that they may form a hypothec or other charge against the property, all municipal / utility services will be paid on or before closing (applicable to purchase transactions);
7.

For a condominium, the common expenses will be paid on or before closing (applicable to purchase transactions).
8.

I confirm that I have obtained consent from the parties to the transaction (purchasers, vendors, borrowers, lenders, as applicable) 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](#).

Mtre

Date

month/day/year

For the purposes of the Insurance Companies Act (Canada), this document is issued in the course of FCT Insurance Company Ltd. and First American Title Insurance Company’s insurance business in Canada. 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](#) or contact our Privacy Officer at 1.800.307.0370. Thank you for choosing FCT!

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.