



Assignment of Provincial Parks Act Disposition

Name of Park	Department File Number Department Assignment Numb					
Cottage Lease Cabin Lease Other (Explain)						
Joint Tenants Tenants in Common						
ASSIGNMENT OF DISPOSITION BETWEEN						
1.	1.					
2.	- and - 2.					
3.	3.					
(hereinafter called the "Assignor(s)")	(hereinafter called the "Assignee(s)")					
The Assignor(s) being the holder of the disposition noted above in consideration of the sum of payment of which is hereby acknowledged by the Assignor(s), hereby assigns the disposition(s) to the Assignee(s), and the Assignee(s) hereby accept(s) and agree(s) to be bound by this assignment.						
	***************************************	Date: (mm/dd/yyyy)				
	ASSIGNOR(S)	all many/orna minhata hithog and internation and				
Effective I/we hereby assign, transfer, set over and convey unto the Assignee(s) all my/our rights, titles and interest in and to the disposition together with all benefits and advantages to be derived therefrom to have and to hold the same for its sole use and benefit, subject to the terms described in the lease agreement. Lease Agreement Attached NOTE: Alberta Environment and Parks reserves the right to decline any assignment request at any time.						
Assignor(s) Witness						
1 Print Name Signature	Print name	Signature				
2 Print Name Signature	Print Name Signature					
Print Name Signature	Print Name	Signature				
	ASSIGNEE					
Name of Assignee 1.	NOTE: Please submit "Additional A additional Assignee. Additional A	ssignee" Form (AEP-LUDM-0012) for each ssignee Form attached? Yes No				
Address	City	Province Postal code				
Email Address Phone I	Number (include area code)	Client I.D.				
If assignee is a corporation, are a majority of the shares of the corporation held by Canadian Citizens? Yes No N/A (Explain)						
If applying as an individual(s) (i.e. not a corporation), are you an employee of the Government of Alberta (GoA) or member of the Legislative						
Assembly? No Yes (Dept/Riding)						
(If the assignee is a GoA employee, attach approval from the Deputy Minister of the relevant department in accordance with the Code of Conduct & Ethics for the Public Service of Alberta. If the assignee is an MLA, please determine what approval documentation must be submitted with this application and attach.) Is/are the assignee(s) 18 years of age or older? Yes No						
DECLARA	ATION OF ASSIGNEE					
I hereby assume responsibility for the payment of all fees, and all municipal, county, or improvement district taxes heretofore levied against all land(s) covered by the assignment which remain unpaid and for the payment of all taxes responsibility notwithstanding that I may not have been in possession of these lands when they were assessed and placed on the assessment roll by the municipality.						
Print Name (Assignee) Sig	gnature (Assignee)	Amount Enclosed				
Print Name (Witness to the Assignee) Signature	re (Witness to the Assignee)	Date (mm/dd/yyyy)				
FOR DEPARTMENT USE ONLY Authorization is hereby granted to enter upon and immediately occupy land as described on this application and in accordance with						
the Provincial Parks Act.						

Any personal information provided in this application is collected in accordance with Section 33(c) of the *Freedom of Information and Protection of Privacy Act* (FOIP) and is protected by the privacy provisions of that Act. Alberta Environment and Parks (AEP) collects, uses and discloses personal information in accordance with Part 2 of the FOIP. Should you require further information about the collection, use and disclosure of personal information, please contact AEP, Parks Operations Division at 780-427-3582.

Date (mm/dd/yyyy)

For Minister of Alberta Environment and Parks

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WITNESS TO ASSIGNOR

AFFIDAVIT OF EXECUTION

CANADA Province of Alberta TO WIT:				
l,	of the City/Town of		in the Province of A	lberta, MAKE OATH
(witness) AND SAY:			•	
	nd did see		med in the within ins	trument who is
personally known to me to be th	(assignor) ne person named therein, duly sign an		for the purpose nam	ned therein;
THAT the same was executed at that I am the subscribing witnes.	the City/Town ofs thereto;		in the Provinc	e of Alberta and
		Sig	nature of Witness	
SWORN before me atCity/Town	in the Province of Alberta this	day	/ of Month	20 Year
Signature, Commissioner of Oaths in and fo		·	and Date Appointment Exp	
	AFFIDAVIT OF EXEC			
CANADA Province of Alberta TO WIT:				
(witness)	of the City/Town of		in the Province of A	berta, MAKE OATH
AND SAY: 1. THAT I was personally present a	nd did see	nar	med in the within ins	trument who is
	(assignee) (assignee) are person named therein, duly sign an			
	the City/Town of			
		_	nature of Witness	
SWORN before me at	in the Province of Alberta this _	day	ot	20

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Month

Print or Stamp Name and Date Appointment Expires

City/Town

Signature, Commissioner of Oaths in and for the Province of Alberta