

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 you would like to order

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: MM/DD/YYYY Purchase Price: \$ _____

Property Purchase Share Purchase Cannabis Deal Energy Deal

New Hypothec / Hypothec Refinancing Construction Hypothecary Loan

CMHC Insured Number of Units (if CMHC insured): _____

Interest Held: Right of Ownership Right of Emphyteusis Superficiary Ownership Other: _____

Property Type: Apartment Building Bed and Breakfast Church Gas Station/Garage Hotel/Motel
 Industrial Building Office Building Restaurant/Bar Condominium Retirement Home
 Trailer Park Medical Practice Educational Facility Salon/Aesthetics
 Mixed Use (commercial with residential) Retail First Nations Land
 Vacant Farm Land (income generating) Farm Land (income generating) with Residential Home
 Vacant Land (non-farm) Other (please specify) _____

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

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 Revolving credit Variable rate of interest

Purchaser/Borrower Information

Purchaser / Borrower: _____

Borrower (if different from borrower): _____

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.

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

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 its 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: MM/DD/YYYY Original Principal Amount: \$ _____ Rank: 1st 2nd 3rd

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

<i>Description*</i>	<i>Publication Number</i>	<i>Publication Date</i>
_____	_____	<u>MM/DD/YYYY</u>
_____	_____	<u>MM/DD/YYYY</u>
_____	_____	<u>MM/DD/YYYY</u>

* 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!