

provision of legal advice.

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Land Title Search Request Form

Requested By:			
Email Address:		-	
Phone Number:	Date:		
Search title by the followin	g:		
Legal Land Description			
Lot:	Block:	Plan:	
ATS			
Meridian:	Range:	Township:	
Section:	Quarter:	Legal Subdivision:	
LINC/Title/Document Nu	mber:		
Preferred Method of Delive	ry: In-person Pickup	Fax Email	
If applicable, please provid	e fax number/email:		
By submitting this form, ye	ou confirm the information as	t out in this document account	
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