

Request PMB Consent

Six months has passed since the notice has been served, and Bob Smith still has not paid his taxes. Betty will now complete the "Request for Consent" Form supplied by the Provincial Mediation Board. A copy of the Title must be attached with the application.

**FORM 5
(Section 24)**

**REQUEST FOR CONSENT
TO MAKE FINAL APPLICATION FOR TITLE**

IN THE MATTER OF *THE PROVINCIAL MEDIATION BOARD ACT*
AND THE TAX ENFORCEMENT ACT

To: The Provincial Mediation Board,
2151 Scarth Street
REGINA, Saskatchewan S4P 3V7

(306) 787-5408
(Fax) 787-5574

From: Town of Lostmyhat Box 36, Lostmyhat, Saskatchewan
(Name of Municipality)

(Address)

RE: Lot(s) **10** Blk. **12** Plan **65R10130 Ext.# 0** City/Town/Village/RM of: Lostmyhat
Sec. Twp. Rge. West of the _____ Meridian.
Title Number(s) 123456789

Under *The Provincial Mediation Board Act* the written consent of the Board to make Final Application for Title is requested and the following information is submitted in support:

ASSESSED OWNER Bob Smith
(Name)
210 Beret Place, Lostmyhat, Saskatchewan
(Last Known Address)

REGISTERED OWNER Same
(If different than assessed owner) (Name)

(Last Known Address)

OCCUPANT OF LAND _____ OF ANY BUILDINGS

Building Use Residential X Commercial _____ Farm _____ In Use: Yes X No _____

ARREARS OWING TO DATE OF APPLICATION \$ 1523.65

CURRENT LEVY (OR LAST YEAR'S) \$ 643.20

ESTIMATED COSTS \$57.00 _____ PENALTY RATE ON ARREARS 10 %

ASSESSMENT LAND 4500 IMPROVEMENTS 50,500

ESTIMATED MARKET VALUE OF LAND AND IMPROVEMENTS \$ 55,000

REMARKS:

ENCLOSURES: DATE May 17, 200X
COPY OF REGISTRY TITLE CONTACT PERSON Betty Jarvis
(UPDATED WITHIN 1 YEAR) TELEPHONE NO. (306) 393-1234
\$20.00 FEE ROLL NO. 505013200
AGENT Town of Lostmyhat