

**Form 27**

**Purpose: to request cancellation of a recorded interest**

*For Office Use*

Registration district: Antigonish

Submitter's user number: 457

Submitter's name: Joe Lawyer

Empty dashed box for office use.

**In the matter of Parcel Identification Number (PID)**

PID <b>46798975</b>	
PID	

*(Expand box for additional PIDs. Maximum 9 PIDs per form.)*

**Power of attorney** (Note: completion of this section is mandatory)

*The attached document is signed by attorney for a person under a power of attorney, and the power of attorney is:*

- recorded in the attorney roll*
- recorded in the parcel register*
- incorporated in the document*

OR

No power of attorney applies to this document

*This form is submitted to record the attached document and to cancel the following recorded interests in the above-noted parcel register(s):*

<b>Instrument type</b>	<b>Release of Mortgage</b>
<b>Interest holder and type to be removed (if applicable)</b> Note: include qualifier (e.g., estate of, executor, trustee, personal representative) if applicable	<b>Bank of Montreal - Mortgagee</b>
Reference to related instrument in parcel register (insert document/instrument number/year; include book/page) (this is a mandatory field for this form)	<b>Book 4323 , Page 12 Document 1567, Year 2009</b>

*The following textual qualifications in the above-noted parcel register(s) are to be changed as follows:*

<b>Textual qualification on title to be removed</b> (insert any existing textual description being changed, added to or altered in any way)	
<b>Textual qualification on title to be added</b> (insert replacement textual qualification)	

*The party releasing the interest on the attached document is a successor company or organization to the interest holder that currently appears in the parcel register and the document relating to this name change or amalgamation has been previously registered or recorded.*

**Certificate of Legal Effect:**

*I certify that , in my professional opinion, it is appropriate to make the changes to the parcel register(s) as instructed on this form.*

**Dated at [Halifax](#), in the County of [Halifax](#), Province of Nova Scotia, [May 4<sup>th</sup>](#), 2009.**

---

*Signature of authorized lawyer*

Name: **[Joe Lawyer](#)**

Address: **[34 Queen St, Halifax, NS B4R 3G7](#)**

Phone: **[425 - 3000](#)**

E-mail: **[jlawyer@ns.sympatico.ca](mailto:jlawyer@ns.sympatico.ca)**

Fax: **[425 - 3001](#)**

---

*This document also affects non-land registration parcels. The original will be registered under the Registry Act and a certified true copy for recording under the Land Registration Act is attached.*

May 4, 2009