

## **TRANSFER CONSENT**

In the Provincial Court of British Columbia

Court File Number:

FMEP No.:

Court Location:

Case name as it appears on the application.	In the case between:
	And: NAME
Court	We agree to the court file being transferred to the Provincial Court at:
<b>location</b> to receive court file.	
<b>Check</b> the appropriate box. If applicable, describe the application you want heard at the new location.	<ul> <li>for the purpose of having an application for heard at that location</li> <li>OR</li> <li>for all purposes.</li> </ul>
State today's date.	Dated
<b>Sign</b> your name and provide your address.	Signature of party ADDRESS
	CITY PROVINCE POSTAL CODE
	PHONE FAX
State today's date.	Dated
<b>Sign</b> your name and provide your address.	Signature of party ADDRESS
	CITY         PROVINCE         POSTAL CODE           PHONE         FAX
<b>Note:</b> a third signature is only required if there is a third party.	
State today's date.	Dated
<b>Sign</b> your name and provide your address.	Signature of party ADDRESS
	CITY         PROVINCE         POSTAL CODE
	PHONE FAX

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