



# SIKSIKA NATION HOUSING SERVICE AREA

POST OFFICE BOX 1040  
SIKSIKA, ALBERTA T0J 3W0  
TELEPHONE (403) 734-5200  
FAX (403) 734-5235  
Email: housing@siksikanation.com

## Permanent Transfer of Occupancy Form (of a Rental Unit)

I, \_\_\_\_\_  
(Current Occupant – Print Name)

of the Siksika Nation do hereby transfer my Occupancy Rights of the Nation owned home that I  
am presently occupying to

\_\_\_\_\_  
(Transferee – Print Name)  
Siksika Nation Member

House # \_\_\_\_\_ Profit # (office use only) \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

X \_\_\_\_\_  
Signature of current home occupant

Band Number \_\_\_\_\_

\_\_\_\_\_  
New Address

Phone: \_\_\_\_\_

X \_\_\_\_\_  
Signature of Transferee

Band Number: \_\_\_\_\_

\_\_\_\_\_  
Address

Phone: \_\_\_\_\_

X \_\_\_\_\_  
Witness

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Office Use Only

This transfer approved on this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Siksika Nation Housing Senior Manager

***This form must be completed in its entirety before it can be approved by the Department of  
Siksika Nation Housing. Please attach letter stating reason for transfer.***



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House # \_\_\_\_\_ Profit # (office use only) \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

X \_\_\_\_\_ Band Number \_\_\_\_\_  
Signature of current home occupant

\_\_\_\_\_  
New Address Phone: \_\_\_\_\_

X \_\_\_\_\_ Band Number: \_\_\_\_\_  
Signature of Transferee

\_\_\_\_\_  
Address Phone: \_\_\_\_\_

X \_\_\_\_\_  
Witness

.....  
Office Use Only

This transfer approved on this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Siksika Nation Housing Senior Manager

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