


# How to complete a B.C. Trapline Transfer Form

 <p style="margin: 0;">Ministry of Water, Land and Resource Stewardship</p>	<p><i>Wildlife Act of British Columbia</i> <b>BRITISH COLUMBIA TRAPLINE TRANSFER</b></p> <p style="text-align: right;">FW-19</p> <p>REGION <input type="checkbox"/> Region Trapline is Located</p> <p>Date: _____ Year/Month/Day</p> <p>Permission obtained from all registered trapline holders may streamline the process.</p>
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I/we, \_\_\_\_\_ **List all names of current registered trapline holders signing form**  
 \_\_\_\_\_  
 Type or print legibly. Attach additional sheets as needed.

do hereby transfer my/our right to trap furbearing animals on registered trapline number:  
 \_\_\_\_\_  
Print Registered Trapline Number where

TR # \_\_\_\_\_ Registered Holders are being added or removed \_\_\_\_\_ and do hereby transfer the aforementioned registered trapline to the following person(s):  
 \_\_\_\_\_  
 List all names of remaining registered trapline holders **AND** all individuals to be added, as completed on the B.C. Trapline Registration Form \_\_\_\_\_  
 \_\_\_\_\_  
 Type or print legibly. Attach additional sheets as needed.

**SIGNATURES OF TRANSFERRING TRAPLINE HOLDER(S):**

<p>Signature of Transferring Trapline Holder _____</p> <p><b>Signature of Transferring Trapline Holder</b> Printed full name of Transferring Trapline Holder _____</p> <p>Print Name _____ Date signed _____</p> <p>Date _____</p> <p><b>IF DECEASED</b> - signed by executor of the estate, someone named in the will, or an immediate family member _____</p> <p><b>Signature of Transferring Trapline Holder</b> <b>IF DECEASED</b> - printed full name of registered trapline holder _____</p> <p>Print Name _____ Date signed _____</p> <p>Date _____</p> <p>_____ <b>Signature of Transferring Trapline Holder</b></p> <p>_____ Print Name</p> <p>_____ Date</p>	<p>Signature of Witness, must not be signee as Transferring Trapline Holder _____</p> <p><b>Signature of Witness</b> Printed full name of Witness _____</p> <p>Print Name _____ Printed full mailing address of Witness _____</p> <p>Address _____</p> <p>Signature of Witness, must not be signee for the deceased Transferring Trapline Holder _____</p> <p><b>Signature of Witness</b> Printed full name of Witness _____</p> <p>Print Name _____ Printed full mailing address of Witness _____</p> <p>Address _____</p> <p>_____ <b>Signature of Witness</b></p> <p>_____ Print Name</p> <p>_____ Address</p>
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