



Members

CLARKSTONE & DEARIN

Notary Corporation

Dorothy Clarkstone
Matthew Dearin

4679 Elizabeth Street
Port Alberni, BC
V9Y 6L8

Tel: 250-723-9747

Fax: 250-723-9721

Email: dorothy@dclarkstone.ca
matt@dclarkstone.ca

February 24, 2023

File No.: 61905/as

Dennis Sheldon Brewer

Dear Sir/Madam:

Re: Ironwood Deedback - Unit 213

Further to a request from Ironwood Owners Enterprises Ltd., please find enclosed the following documents for your signatures:

1. Form A, Freehold Transfer - to be notarized;
2. Form C, Release of Sublease - to be notarized;
3. Statutory Declaration, re: buyer's property transfer tax return; -please complete your mailing address - to be notarized
4. Share Transfer;
5. Copy of the title search;
6. Application for Certificate of Compliance - please complete your date of birth at the top of page 1 and date & sign on page 2;
7. Application for Canadian Tax ID Number – please complete & sign;
8. Notary Certification – to be completed by a Notary Public. Please ensure a photocopy of your ID is attached to the document.

Please attend a notary public to have your signatures witnessed on the enclosed documents and return all originals documents to my office at your earliest convenience.

Please ensure that the notary that witnesses your signatures prints their full name, address & phone below their signature and dates the document, otherwise, it will not be accepted by our land title office.

Please note that if you as the seller/transferor do not comply with the requirements from Canada Revenue Agency that any tax assessment with regard to this sale will be billed to the buyer. Canada Revenue Agency may request further documentation which will be sent to you for completion and return to my office. In the event this is not completed in a timely manner by you, assessments and/or penalties can be assessed to the buyer.

Upon receipt of executed documents and completion of the transfer I will advise the owners association to update their records to remove your name as owner of the above unit and week.

I trust you find the above and enclosed to be in order, however, if you have any questions please do not hesitate to contact our office.

Yours truly,

For [Signature]

DOROTHY CLARKSTONE

Notary Public

DC/as

Enclosures

**Request by a Non-Resident of Canada for a Certificate of Compliance Related to the
Disposition of Taxable Canadian Property**

Note: The information you provide on this form is collected under the authority of the *Income Tax Act* (ITA) and is protected by the provisions of the *Privacy Act*. It is used to process requests for certificates of compliance under Section 116 of the ITA and is retained in information bank number CRA-OPPU 111.

Vendor (non-resident)

<input type="checkbox"/> Corporation		<input type="checkbox"/> Trust		<input type="checkbox"/> Partnership		<input checked="" type="checkbox"/> Individual	
Business number		Trust account number		Social insurance, individual tax, or subsidiary ledger number			
Last name (print)		First name and initial (print)		Date of Birth		Date of departure from Canada (if applicable)	
BREWER		DENNIS S.		1955 09 23		YYYY MM DD	
Present address				Telephone number		101 887 6541	
Country of residence (see the instructions on page 1)		Edgewater NJ		Fax number			
USA				Telephone number		250-723-9747	
Representative name				Fax number			
CLARKSTONE & DEARIN NOTARY CORP.							
Representative address							
4679 ELIZABETH STREET, PORT ALBERNI, BC V9Y 6L8							
Check the box where correspondence is to be sent (if no box is ticked, correspondence will be sent to vendor)				<input type="checkbox"/> Vendor		<input checked="" type="checkbox"/> Representative	

Purchaser

Last name (print)		First name and initial (print)		Telephone number			
IRONWOOD OWNERS ENTERPRISES LTD.							
Present address				Fax number			
C/O ONE VANCE GAP ROAD, ASHEVILLE, NC 28805							
Representative's name				Telephone number			
CLARKSTONE & DEARIN NOTARY CORP.				250-723-9747			
Representative address				Fax number			
4679 ELIZABETH STREET, PORT ALBERNI, BC V9Y 6L8							
Check the box where correspondence is to be sent (if no box is ticked, correspondence will be sent to purchaser)				<input type="checkbox"/> Purchaser		<input checked="" type="checkbox"/> Representative	

Details of property (see the instructions on page 1 for more information)

<input checked="" type="checkbox"/> Real property		<input type="checkbox"/> Business property		<input type="checkbox"/> Shares		<input type="checkbox"/> Partnership property		<input type="checkbox"/> Trusts		<input type="checkbox"/> Designated insurance property			
Date or proposed or completed disposition		YYYY MM DD		Vendor's acquisition date		YYYY MM DD							
Property jurisdiction		City/ Municipality		Province/territory		Postal code							
WHISTLER		WHISTLER		BC		V8E 0N3							
Property description													
AS TO 1/2 OF AN UNDIVIDED 1/51 INTEREST IN STRATA LOT 26 DISTRICT LOT 4751 STRATA PLAN VR. 2558													
CIVIC ADDRESS: 213-3217 BLUEBERRY DRIVE, WHISTLER, BC													
Gross proceeds of disposition. Tick the box that applies to you										<input type="checkbox"/> Proposed disposition		<input checked="" type="checkbox"/> Completed disposition	
(1) Vendor's Share of Gross Proceeds of Disposition		(2) Adjusted cost base		(3) Gain or (loss) Column (1) less column (2)		(4) Exemptions		(5) Net gain or (loss) Column (3) less column (4)					
\$ 0.50		\$ 6,950.00		\$ (6,949.50)		\$		\$ (6,949.50)					
Payment of tax. Enter 25% of net gain.										\$			

1. Is the disposition subject to an election under section 85 (transfer of property to a company)? ☐ Yes ☒ No

2. Did you rent or lease the property during the period of ownership? ☐ Yes ☒ No
If **yes**, complete the following:

☐ Non-resident tax was withheld. Provide name and address of person who withheld the tax. ▶

☐ Non-resident tax was not withheld. State the period during which income was received from the property (attach statements that show the amount of gross income). ▶

If **no**, state the use of the property during the period of ownership. ▶

From: YYYY	MM	DD	To: YYYY	MM	DD
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PERSONAL USE

3. If you have outstanding balances for taxes, including income or excise taxes, custom duties, or the goods and services tax/harmonized sales tax (GST/HST), provide the identification or account number(s) for the outstanding balances. ▶

4. Indicate the last tax year for which you filed a Canadian income tax return, if applicable. ▶

5. Is the disposition of property to a person with whom you are not dealing with at arm's length, or a gift inter-vivos? ☐ Yes ☒ No
If **yes**, to either or both, and the disposition is at less than fair market value, enter the vendor's share of the fair market value at the time of the disposition in the vendor's share of gross proceeds of disposition column (1) above.

Certification

Please check the box(es) that apply if you are authorizing the CRA to deal with your representative concerning:

- ☒ T2062, Request by a Non-Resident for a Certificate of Compliance Related to the Disposition of Taxable Canadian Property
- ☒ T1261, Application for a CRA Individual Tax Number (ITN) for Non-Residents

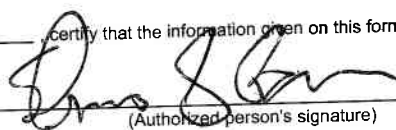
I, **DENNIS S. BREWER**

Name

5-26-23

Date

I certify that the information given on this form is, to the best of my knowledge, correct and complete.



(Authorized person's signature)

OWNER

(Position or office)

**Application for a Canada Revenue Agency Individual
Tax Number (ITN) for Non-Residents****Before you start:**

- Do not submit this form if you have, or are eligible to obtain, a social insurance number (SIN). For more information about obtaining a SIN, call Service Canada toll-free at **1-800-206-7218**. Select option "3" for SIN information. If you are calling from outside Canada, or if you have a rotary dial telephone, call **506-548-7961** (long distance charges will apply). You may also visit their website at **servicecanada.gc.ca**.
- Do not submit this form if you have previously obtained a SIN, an ITN, or a temporary taxation number. Continue to use the tax number you have already been issued.

Indicate the reason you are applying for an ITN:

- ☐ Filing a Canadian income tax return
- ☐ Filing a Canadian income tax return for Electing Under section 216 return (please submit the return with this application)
- ☐ Filing an application to waive or reduce Canadian withholding tax on payments that you receive
- ☒ Disposing of taxable Canadian property
- ☐ International Student (without a work permit)

**Supporting certified documents:
(one of which must contain a photo)**

- ☐ Valid passport
- ☐ Driver's licence
- ☐ Other (please identify): _____

Identification (please print)**1. Name**

Last name

BREWER

First name

DENNIS

Middle name(s)

SHELDON**2. Foreign address**

Apartment number, street address, street name

City

**1210 City Place
Ferguson**

Province or State

NT

Country

USA

Postal code or zip code

07076**3. Mailing address (if different from above)**Care of (c/o) - Enter the name of the individual representing the applicant in Canada (if any)
CLARKSTONE & DEARIN NOTARY CORP

Apartment number, street address, street name

4679 ELIZABETH STREET

City

PORT ALBERNI

Province or State

BC

Country

CANADA

Postal code or zip code

V9Y 6L8**4. Birth information**

Date of birth (YYYY-MM-DD)

20 1955-09-23

Country of birth

USA**5. Other information**

Foreign tax identification number

Telephone number

201 887 6541**Certification of Applicant**I, **DENNIS SHELDON BREWER**
(Please print applicant name)

certify that the information given on this form is, to the best of my knowledge, correct and complete.

Date

5-26-2005

Signature of applicant (electronic signature is not accepted)

Canada



1. Application

Clarkstone & Dearin Notary Corp
4679 Elizabeth Street
Port Alberni BC V9Y 6L8
(250) 723-9747

Application made on behalf of the Transferee/Lessor

2. Description of Land

PID/Plan Number	Legal Description
015-401-260	STRATA LOT 26 DISTRICT LOT 4751 STRATA PLAN VR. 2558

3. Nature of Interest Being Released

Number	Type
BM160739	LEASE

Additional Information

Under head lease GD44322 in favour of
Ironwood Owners Enterprises Ltd., Inc. No.
BC0383370

4. There is no Part 2

The charge described in item 3 is released or discharged as a charge on the land described in item 2.

5. Transferor(s)

JEANETTE ANN AUSTIN
DENNIS SHELDON BREWER

6. Transferee(s)

REGISTERED OWNER

7. Execution(s)

This instrument releases or discharges the interest(s) described in Item 3 and the Transferor(s) and every other signatory agree to be bound by this instrument.

Witnessing Officer Signature

Execution Date

Transferor / Transferee / Party Signature(s)

Notary Public

Print Name:

Address:

Phone:

YYYY-MM-DD

Jeanette Ann Austin

Officer Certification

Your signature constitutes a representation that you are a solicitor, notary public or other person authorized by the *Evidence Act*, R.S.B.C. 1996, c.124, to take affidavits for use in British Columbia and certifies the matters set out in Part 5 of the *Land Title Act* as they pertain to the execution of this instrument.

Witnessing Officer Signature

Execution Date

Transferor / Transferee / Party Signature(s)

Notary Public

Print Name:

Address:

Phone:

YYYY-MM-DD

Dennis Sheldon Brewer

Officer Certification

Your signature constitutes a representation that you are a solicitor, notary public or other person authorized by the *Evidence Act*, R.S.B.C. 1996, c.124, to take affidavits for use in British Columbia and certifies the matters set out in Part 5 of the *Land Title Act* as they pertain to the execution of this instrument.





Electronic Signature

Your electronic signature is a representation that you are a designate authorized to certify this document under section 168.4 of the *Land Title Act*, RSBC 1996 c.250, that you certify this document under section 168.41(4) of the act, and that an execution copy, or a true copy of that execution copy, is in your possession.

A handwritten signature in black ink, enclosed within a rectangular box. The signature appears to be "Diana Henderson".



1. Application

Clarkstone & Dearin Notary Corp
4679 Elizabeth Street
Port Alberni BC V9Y 6L8
(250) 723-9747

File No.: 61905/as
Please merge titles for Ironwood Owners Enterprises Ltd.

2. Description of Land

PID/Plan Number	Legal Description
015-401-260	STRATA LOT 26 DISTRICT LOT 4751 STRATA PLAN VR. 2558 As to an undivided 1/51 interest

Market Value
\$1.00

3. Consideration

\$1.00

4. Transferor(s)

JEANETTE ANN AUSTIN
DENNIS SHELDON BREWER

5. Freehold Estate Transferred

FEE SIMPLE

6. Transferee(s)

IRONWOOD OWNERS ENTERPRISES LTD.
C/O ONE VANCE GAP ROAD
ASHEVILLE NORTH CAROLINA 28805
UNITED STATES OF AMERICA

BC0383370



7. Execution(s)

The transferor(s) accept(s) the above consideration and understand(s) that the instrument operates to transfer the freehold estate in the land described above to the transferee(s).

Witnessing Officer Signature

Execution Date

Transferor / Transferee / Party Signature(s)

Notary Public

Print Name:

Address:

Phone:

YYY-MM-DD

Jeanette Ann Austin

Officer Certification

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Witnessing Officer Signature

Execution Date

Transferor / Transferee / Party Signature(s)

Notary Public

Print Name:

Address:

Phone:

YYY-MM-DD

Dennis Sheldon Brewer

Officer Certification

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Electronic Signature

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SHARE TRANSFER

IRONWOOD OWNERS ENTERPRISES LTD. (the "Company")

AND TO: ITS DIRECTORS

The undersigned (the "Transferor"), for valuable consideration received, hereby transfers to:

IRONWOOD OWNERS ENTERPRISES LTD. (the "Transferees")

- (a) those Common Shares in the authorized capital of the Company evidenced by the attached share certificate(s), if any, and
- (b) all right, title and interest of the undersigned in any shares in the Company, if any, other than those evidenced by the attached share certificate, if any,

to hold unto the Transferee, its assigns and their heirs, executors, administrators and assigns, subject to the Memorandum and Articles of the Company;

The Transferor represents and warrants that he/she has not transferred, pledged or hypothecated any shares in the authorized capital of the Company issued to the Transferor and hereby indemnifies and holds harmless the Transferee from and against any loss or damage arising out of any claim or proceeding made or brought by any person in relation to such shares.

Date:

Signature:

Print name: DENNIS SHELDON BREWER

Witness:

IN THE MATTER OF the transfer of an undivided 1/51 interest in 015-401-260 STRATA LOT 26 DISTRICT LOT 4751 STRATA PLAN VR.2558; # 213-3217 Blueberry Drive, Whistler (the "Properties")

1. I am one of the owners of the Property and as such have knowledge of the matters in this statutory declaration.
2. For the purpose of the Transferees complying with the Property Transfer Tax Return (version 34), we hereby certify and declare the following and hereby consent to the release of this information to the Buyers' solicitor/notary:

My address: 1210 City Pl Edgewater NJ 07020

My telephone number: 201 887 6541

DECLARED before me at the City of New York, in the State of New York, this 16 day of May, 2023.


Dennis Sheldon Brewer



ID VERIFICATION

State of New York

County of New York

On this 26 day of May, 2023, I certify that the preceding or attached government issued photo identification is a true, exact, and complete, and exact photocopy made by me from the original document, Auto Driver License (driver's license or passport), presented to me by the document's owner DENNIS SHELDON BREWER

Dated: 5/26/23



(Seal or Stamp)

[Signature]

Signature of Notary

500 W 30th St

Address

New York, NY 10001

646-604-4764

Phone

Notary Public

Title

My appointment expires: 01-21-2024

This invoice

EXPORTED
Tax ID#:
Contact Name:
Telephone:
E-Mail:
Company Name:
DENNIS:
1210 CIT



Edgegate
Country/Territory:
Parties to Transaction:
☐ Retail

CONSIGNEE
Tax ID#:
Contact Name:
Telephone:
E-Mail:
Company Name:
Mathew Dearin
4679 Elizabeth

Port Alberni
Country/Territory:
If there is a
Name of Branch:
Duties and Taxes:

No. of
Packages

Address: 368 NINTH AVE
NEW YORK
NY 10001
Location: TSSKA
Device ID: -BTC02
Transaction: 940367548327

FedEx International Ground

Tracking Number: 398843258724 * 0.05 lb (S) 52.17
Declared Value 1

Recipient Address:
Dorothy CLARKSTONE
Mathew Dearin
4679 Elizabeth STREET
Port Alberni, BC V9Y6L8, CA
2507239747
dorothy@dclarkstone.ca

Scheduled Delivery Date 6/7/2023

Package Information:
Your Packaging
16 x 9 x 1

Standard-Large Slick Mailer
400000016047 1 (T) \$3.49

Shipment subtotal: \$52.17
Merchandise taxable subtotal: \$3.49
Tax(City): 4.5% \$0.16
Tax(SC): 0.375% \$0.01
Tax(NY): 4% \$0.14

Total
Pkgs

1

Special Instructions

Declaration
These items are
identified. They
their original form

I declare that

Originator of
DENNIS S

Signature

Total Due: \$55.97
(S) CreditCard: \$55.97
*****6780

*** See Payor's Invoice

M = Weight entered manually
S = Weight read from scale
T = Taxable item

Terms and conditions apply, including terms that limit
FedEx's liability. The estimated shipping charge
may be different than the actual charges for your
shipment. Differences may occur based on actual weight,
dimensions and other factors. Shipment-related terms
and conditions are available upon request or at
fedex.com/serviceguide.

Commercial Invoice

Page 1 of 1

Ship Date:

30 May, 2023

Air Waybill No. / Tracking No.:

398843258724

Invoice No.:

Purchase Order No.:

Payment Terms:

Bill of Lading:

Purpose of Shipment:

REPAIR_AND_RETURN

SOLD TO /IMPORTER (if different from Consignee):

☒ Same as CONSIGNEE:

Tax ID#:

Company Name/Address:

Country/Territory: CANADA

Contact Name:

Please specify

	Harmonized Tariff Number	Country/ Terr. of MFR	Unit Value	Total Value
INCLUDING ID BANKING ORDERS; OF ET ONLY,		US	1.000000	1.00

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	Subtotal:	1.00
	Insurance:	0.00
	Freight:	0.00
	Packing:	0.00
	Handling:	0.00
	Other:	0.00
	Invoice Total:	1.00
of a company or individual:	Currency Code:	USD

30 May, 2023

REV. 08-23-22

Please press firmly / Appuyer fermement

WALTER TROWOOD TIMESHARE

1210

DO NOT COVER



NE PAS COUVRIR

Purolator

ICI.

de.

z

sur

Purolator

Ne couvrez pas le traitement.

1888 SHIP-123

purolator.com

Purolator Express Envelope U.S. 10:30AM

FROM / DE
Dorothy Clarkstone Notary
Dorothy Clarkstone
4679 ELIZABETH ST
PORT ALBERNI BC

TO / A
Dennis Brewer
1210 City PL
EDGEWATER NJ 07020

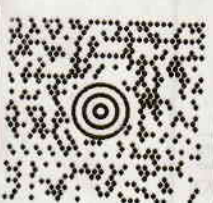
DOROTHY CLARKSTONE
DOROTHY CLARKSTONE NOTARY
12507239747
4679 ELIZABETH ST
PORT ALBERNI BC V9Y 6L8
CANADA

LTR 1 OF 1

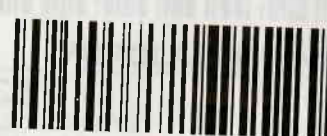
SHP#: 662F 4XR8 JKF
DATE: 21 APR 2023

SHIP TO
DENNIS BREWER
DENNIS BREWER
00

1210 CITY PL
EDGEWATER NJ 07020
UNITED STATES



NJ 070 9-05



635

DUTIES/TAX

DDU: [X]

DDP: []

DESTINATION

TEB

UPS EXPRESS

TRACKING #: 1Z 662 F4X 66 8286 0520

1

