

12599

PERSONAL

BUREAU POWELL STREET

FILE NO. 12599

OFFICE OF THE CUSTODIAN

JAPANESE SECTION

To be completed by persons of the Japanese race having property in any protected area. The proper administration of this property requires such persons to give full particulars as requested in this form.

PERSONAL INFORMATION

NAME: WATARI Hatsujo (Mrs. Gentaro)

HOME ADDRESS: 625 E. 15th Ave., Vancouver, B. C.

REGISTRATION NUMBER 01039 SEX: Female AGE: 34

OCCUPATION: Housewife

(If any business or businesses carried on, state where, under what name and whether carried on by yourself or in partnership with anyone; if partnership, give partner's name.)

EMPLOYER: none

MARRIED? yes

NAME OF WIFE OR HUSBAND: Gentaro O.R.

ADDRESS OF WIFE OR HUSBAND: Slocan City.

NAMES OF ANY LIVING CHILDREN: Katsumi (M)

Yuriko (F)

ADDRESS OF CHILDREN: 625 E. 15th Ave., Vancouver.

AGE OF CHILDREN: 12, 11 yrs.

STATEMENT OF ALL REAL PROPERTY (Each parcel must be mentioned and particulars given)

1. LOCATION AND DESCRIPTION:

none

2. BUILDINGS AND OTHER IMPROVEMENTS:

none

none

3. INSURANCE (Give particulars; state where policies are)

none

4. TAXES (Amount and where payable) none

5. ENCUMBRANCES (Including any unregistered claims or deposit of title deed)

none

6. OCCUPANCY AND LEASES (If vacant so state)

none

3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OR CLAIM ON ANY SUCH PROPERTY
none

2. HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS
none

1. GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:
STATEMENT OF PERSONAL PROPERTY OWNED:
none

6. IF FARM LAND, PARTICULARS OF CROPS SOWN:
none

5. SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid)
none

4. STATE WHEREABOUTS OF LEASE: none

3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:
\$11.00 per month. Paid up to end of August, 1942.

2. LANDLORD'S NAME AND ADDRESS:
The Canadian Permanent Trust Co., 432 Richards St., Vancouver.

1. LOCATION AND DESCRIPTION:
Occupies 4 room, on 2nd floor of 2 storey, wooden bldg.
625 E. 15th Ave., City of Vancouver.

STATEMENT OF REAL PROPERTY OCCUPIED

9. IF FARM LAND STATE CROPS SOWN
none

8. STATE IF ANY OTHER PERSON HAS ANY INTEREST:
none

7. STATE WHEREABOUTS OF TITLE DOCUMENTS:
none

4. INSURANCE CARRIED ON ABOVE PROPERTY: _____
none

5. MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION OF OTHERS: _____
none

6. MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) _____
none

7. BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State whereabouts) _____
\$10.00 worth of War Savings Certificates. In own possession.

8. BANK ACCOUNTS: _____ none

9. LIFE INSURANCE: Mr Monarch Life Insurance Co. In name of husband, Gentaro. \$1000.00. Policy in own possession, number P92944. Beneficiary declarant. (Husband went to Road Camp in March and went to Slocan City from

10. INTEREST IN ANY ESTATES OR TRUSTS: (there, declarant does not know whether (he has registered)
none

11. SAFETY DEPOSIT BOX: _____ none

LIABILITIES:

1. PERSONAL DEBTS: _____
none

2. TRADE DEBTS: _____
none

I, the undersigned, hereby voluntarily turn over to the Custodian all my property in the protected area as set out above, excepting fishing vessels, deposits of money, shares of stock, debentures, bonds or other securities, if any.

I certify that the above information is true and complete and fully discloses all my property of every description in any protected area in British Columbia and sets forth all my liabilities direct and indirect.

Dated this 29th day of August 1942.

(Signature) Hatsune Watani
S. Uchida

M. Wright
Witness

FOR DEPARTMENTAL USE _____

INFORMATION FROM R.C.M.P.

12599

DATE 5/5/43

Cur File No. 12599

Full Name WATARI, Hatsue (Mrs. Gentaro)
(Surname in Block Letters)

Registration No. 01039

Male - Female
(Check)

Age 8/12/1907

Former Address 625 East 15th Ave. Vancouver, B. C.

Date Evacuated Sept. 9/42

Naturalized - Canadian-Born - National
(Check)

Present Address Slocan, B. C.

Married - Single
(Check)

Name of Wife _____

Name of Husband Gentaro - # 0A525

Name of Mother Dec'd

Name of Father Dec'd

Names of Children under 16 See husbands Sheet

Requested by A. M.

Registered with Custodian _____
(Yes or No)

Additional Information Housewife