

151955

EVACUATION SECTION

Rec'd NOV 5 1943

FILE No. 15195

File No.

OFFICE OF THE CUSTODIAN

App.

L.M.C.

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: (In full) Petsuji Koyama
HOME ADDRESS: (Person's residence) 391 Powell St Van
REGISTRATION NUMBER 07238 SEX: Male AGE: 26
OCCUPATION: Orchard & farm worker.

(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: J.E. Scaton

MARRIED? No

NAME OF WIFE OR HUSBAND: _____

ADDRESS OF WIFE OR HUSBAND: _____

NAMES OF ANY LIVING CHILDREN: _____

ADDRESS OF CHILDREN: _____

AGE OF CHILDREN: _____

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

1. LOCATION AND DESCRIPTION: I have no property remaining in the protected area.

2. BUILDINGS AND OTHER IMPROVEMENTS: _____

3. INSURANCE (Give particulars; state where policies are) 25 yrs. endowment with the Sun Life Assurance of New York

4. TAXES (Amount and where payable) _____

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

6. OCCUPANCY AND LEASES (If vacant so state) _____

STATEMENT OF REAL PROPERTY OCCUPIED

1. LOCATION AND DESCRIPTION:

2. LANDLORD'S NAME AND ADDRESS:

3. PARTICULARS OF LEASE AND RENT AND DATE TO WHICH PAID:

4. STATE WHEREABOUTS OF LEASE:

5. SUB-TENANTS, IF ANY (Give name, address, rent and to what date paid):

6. IF FARM LAND, PARTICULARS OF CROPS SOWN:

STATEMENT OF PERSONAL PROPERTY OWNED:

1. GIVE BRIEF DESCRIPTION AND STATE LOCATION OF FURNITURE, FIXTURES, EQUIPMENT AND MACHINERY, STOCK IN TRADE AND PERSONAL EFFECTS:

2. HORSES, LIVESTOCK AND OTHER ANIMALS, POULTRY AND PETS

3. GIVE THE NAME AND ADDRESS OF ANY PERSON HAVING ANY INTEREST IN, OR

CLAIM ON ANY SUCH PROPERTY

4. INSURANCE CARRIED ON ABOVE PROPERTY: _____

5. MORTGAGES, LIENS AND OTHER CLAIMS ON PROPERTY IN POSSESSION OF
 OTHERS: _____

6. MONEYS OWING TO YOU (State if any of these debts assigned and if so, to whom) _____

7. BONDS, DEBENTURES, SHARES, STOCKS OR OTHER SECURITIES (State whereabouts) _____

8. BANK ACCOUNTS: _____
9. LIFE INSURANCE: _____
10. INTEREST IN ANY ESTATES OR TRUSTS: _____

11. SAFETY DEPOSIT BOX: _____

LIABILITIES:

1. PERSONAL DEBTS: _____

2. TRADE DEBTS: _____

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 2 day of November 1943

(Signature)

Reiji Koyama

J. Koyama
 Witness

FOR DEPARTMENTAL USE _____

INFORMATION FROM R.C.M.P.

Date Aug 22/43

Our File No. 15195

Full Name KOYAMA Tetsuji
(Surname in Block Letters)

Registration No. 07238 Male - Female
(check) Age Feb. 9, 1917

Former Address R.R. #1 Kelowna B.C.
463 Powell St., City
391. " " "

Date Evacuated Apr. 7/42 Naturalized - Canadian-Born - National
(check)

Present Address Winfield, B.C.

Married - Single
(check) Name of Wife —

Name of Mother (^{nee} FUJIOKA) Zume Name of Husband —
(Dead) Name of Father Eigiso # 11899

Names of Children under 16 _____

Requested by CCP Registered with Custodian _____
(Yes or No)

Additional Information Millbank

⑨

(Information supplied by Ins. Co.)

LIFE INSURANCE

Name Mr. Tetsuji Koyama

File No. NR.

15195

Winfield BC

Reg. No.

07238

Company Sun Life

Agency Vancouver

Policy No. 2239633

Premium - \$ 40.20

Payable: Annually, Semi-annually or monthly

Month August Day 8

REMARKS:

3

letter sent 28/19/43

R.R. No. 1
Delaware Rd
Sept 30 1943

Custodian Office
S. M. Gibson.

Sons. Dept.

506 Royal Bank Bldg,
Hastings-on-Harbour,
New Canada, Ont.

EVACUATION SECTION	
Rec'd	OCT 4 1943
File No.	15195
Ans.	10/4/43
Referred	Gibson

Dear Sir,

In reply to your letter of the
29th inst. regarding my insurance
policy. I wish to inform you that
I have and will make payments on
the premiums as they come due.
I hope this information will
be to your approval.

Yours

Yours truly,
Detsuji Koyama.

15195

October 30th, 1943.

Mr. Tetsuji KOYAMA,
Registration No. 07238,
Winfield, B. C.

Dear Sir:

Will you please, immediately on receipt of this letter, fill up, sign and return to us two copies of the 'JP' Property Declaration Form sent to you on September 22nd. Be sure to fill in on page three of the forms a description of your Life Insurance Policy.

We require this information simply in order that our records may be complete.

Yours truly,

D. M. Chope,
Administration Department.

DMC/HMS